INSTRUCTIONS FOR APPLICATION COMPLETION
Mobile Retail Food Establishments

If you SERVE food to the public, you are required by state law to have an approval from the local health department prior to operating. It does not matter if the food is sold or given away, you MUST have an approval.

A MOBILE FOOD ESTABLISHMENT is any movable restaurant, truck, van, trailer, cart, bicycle, watercraft, or other movable unit including hand carried, portable containers in or on which food or beverage is transported, stored, or prepared for retail sale or given away at temporary locations. A TEMPORARY food establishment operates for no more that 14 consecutive days in conjunction with a single event or celebration. A SEASONAL food establishment operates during specific months of the year as designated by the operator on the application. An ANNUAL food establishment operates on a routine schedule, year round. Municipalities may require a license, which may also have a fee attached. Please contact the municipality in which you would like to operate for more information.

PAGE 1, PART 1: TO BE COMPLETED BY FOOD VENDOR
Mobile Vendor Business Information
Trading Name: Write the trade name that identifies the mobile facility.
Owner Corporation Information: Provide Name, Street Location, Mailing Address, Home/Cell/Fax numbers, Email address for the responsible individual of the mobile retail food business. Indicate the Contact person, the person who is most knowledgeable about food operations, their Phone/Cell numbers and Email address.

Type of Mobile Unit
Provide this basic information about the general type of mobile unit you have such as a vehicle cart, tabletop/tent, etc.
Sanitation/Personal Hygiene & Other Equipment: Using the chart, check ALL the equipment necessary to prevent food contamination that is part of your mobile unit for sanitation, personal hygiene and other equipment. You may write in items that are utilized but not listed in these sections. Ensure that you have all the necessary equipment to store clean water, dispose of waste water, provide running water, clean hands and surfaces properly and often, prohibit staff from touching foods with their bare hands that don’t require additional cooking (Ready-To-Eat food), protect foods in storage, separate raw meats and eggs while being stored and thermometers to monitor temperatures of food and units.
Mobile Food Unit Operation Schedule
List ALL physical vending locations/event information and the months/days/times you intend to serve food. Provide Names of Events, Days/Times operating at event & Event Contact Person Name/Phone/Email. You must ensure that the application is as complete as possible. The more information you supply on the application, the better we can help serve your needs. However, if you wish to add a location, event or make any other changes to your initial application, contact the Ocean County Health Department to obtain and complete an amendment form for the changes or added information. Any changes in your operation must be reported to the health department immediately. Also remember that each municipality within Ocean County has separate and unique requirements; vending permits may also be required.

PAGE 2, PART 1: TO BE COMPLETED BY FOOD VENDOR
Description of Food operations (including Menu-Food Source-Equipment-Preparation-Handling-Storage): List all food & drink that you plan to serve. If you need additional forms, make copies or contact the health department for additional forms. Once the food items are listed, fill in All boxes across the grid row for that food item such as listed raw animal ingredients or plant ingredients, where the item was purchased and prepared, how the item is cooked, cooled, held hot, reheated and/or held cold. Include an English translation when necessary; please notify the local health department if you need help with translations. *FOOD CANNOT BE PREPARED FROM HOME!!! It is important to have receipts onsite for all food items that you buy. Also, monitor food temperatures and storage units at all times using thermometers. Ensure that you cook potentially hazardous food (containing raw animal or plant ingredients) to proper temperature (a Potentially Hazardous Food is a food that requires temperature control
because it can grow bacteria, toxin and other microorganisms that can cause illness), maintain foods at refrigerated temperatures of 41F or below or keep foods hot at 135 F or above and separate raw meats and eggs from other foods while being stored to avoid cross contamination.

**PAGE 3, PART 2: TO BE COMPLETED BY SERVICING AREA OWNER/MANAGER**

In order to obtain a mobile food approval, the mobile facility must operate from an approved fixed food establishment referred to as a servicing area. Mobile facilities must have an agreement with approved servicing are with a current health department approval. A home kitchen is NOT an approved servicing area.

**Servicing area business information:** Provide the TRADE NAME that identifies the servicing area. Owner/corporate name and physical address and telephone number for the facility. Provide the last inspection date conducted by the local health department. A copy of the most current inspection report is required if the servicing area is NOT inspected by the local health department where the mobile application is being made.

**I provide what foods for the mobile unit:** Check all boxes that pertain to the foods your business provides to the vendor.

**I provide what services for the mobile unit:** Include all the ways and in what capacity your facility accommodates the mobile vendor’s operation by checking all boxes that apply. Is the mobile vendor preparing food at your facility? Storing food (dry goods, grocery, cold foods in refrigerator)? Storing utensils and equipment? Returning to your facility to use the 3 compartment sink for washing/rinsing/sanitizing food contact surfaces of equipment and utensils? Disposing of trash, waste water or grease/oil? Park their mobile unit at your facility? Plug their mobile unit into electric at your facility?

**What days and times does the mobile vendor report to my facility:** You have indicated in the last two sections how the mobile vendor will be utilizing your facility. In this section, you must indicate the days and times of the week when the vendor has access to your facility. In making these arrangements, consider when the mobile vendor can come into your facility without interrupting the retail food operations for your business. Consider the vendors food and equipment storage needs, food prep time, and cleaning/sanitizing needs both during and at the end of their proposed workday.

**Certification/Signature:** Read this section carefully and sign that you understand your role in the mobile food operations and have provided correct information. The agreement between the mobile vendor & servicing area is part of the application approval and grants approval for specific days, times & location of food operations at the servicing and vending locations. Both parties have the obligation to notify the health department when servicing, vending locations, set-up, menu, staff or any other changes are made from the approved application.

**PAGE 4, TOP SECTION: REQUIRED ATTACHMENTS (BOTTOM-SECTION – HEALTH DEPT./ OFFICIAL USE ONLY)**

**Copy of vehicle registration:** A current copy of the vehicle’s registration card must be provided to show the VIN# of the vehicle being used for the mobile food operation.

**Floor plan:** Sketch/layout/photo diagram of your operation. Draw/print/photo of the arrangement of all equipment & food preparation areas. Include restroom.

**Water testing records:** NJ state certified laboratory results for water utilized for food operations or public water source.

**Food protection manager’s certification:** If you are classified as a risk type 3 food facility, one that prepares and serves Potentially Hazardous Foods (raw animal/plant products), serves a susceptible population or has a large menu which requires the complex preparation including cooking, cooling & reheating of 3 or more PHF’s, you must have at least one person in charge (PIC) of the facility operations to be certified as a food manager.

**Servicing area’s last inspection report:** Provide a copy of the last inspection report for the servicing area. This must be the full report, not just the placard. If the servicing area is inspected by the same health department to which you are submitting the mobile food establishment application, no report is necessary.