

# OREGON Health & Human Services Health & PLAN REVIEW APPLICATION

Mobile Unit Name:	
Mobile Unit Operating Address:	
Owner name:	
Individual □ Corporation □ Partnership □ Other □	
Owner mailing address:	
Owner phone #: Establishment phone #:	
Email:	
New construction □ Remodel □ Completion date:	
Previously licensed? Yes D No D Former name:	
Mobile Food Unit Class I□ II□ III□ IV□	
Operating with a Commissary? Yes□ No□ Operating with a W	arehouse? Yes□ No □
OAR 333-162-0920 requires that a completed plan review packet be so reviewed before your unit can be issued a license and approved to open	
Incomplete plans may be returned for additional information.	
The payment of \$mobile food unit plan review for Make checks payable to:	ee enclosed.
Marion County Environmental Health	
I agree to comply with the provisions of Oregon Revised Statutes, Countries the Administrative Rules, Chapter 333, of the Oregon Department of Services.	_
Signed:Da	te:
Please call your local county environmental health office if you have que license, fees, facility inspections or how to obtain a food handler of	-
FOR OFFICE USE ONLY	
Fee received:	Date:
Reviewed by:  Approved A Not Approved A	Date:
Approved $\Delta$ Not Approved $\Delta$ Comments:	



### MOBILE FOOD UNIT PLAN REVIEW PACKET

Complete the attached documents and submit them with the required plan review fee to the local environmental health department. **Approval from the local environmental health department must be obtained prior to construction or operation of your unit**. Include the following information with your plan review submission:

<b>A.</b> Mobile Food Unit Plan Review App	lication
B. Mobile Food Unit License Applicati	on Form
C. Menu – Attach a complete menu: A	printed menu or list of all food you will serve
D. Floor Plan/Equipment Layout	
☐ Complete plans of the unit draw	n to scale, including floor plan, equipment
location, and plumbing fixtures	
Handwashing sink	
☐ Three-compartment sink with d	rain boards; include dimensions (L x W x D)
of interior of sink basin.	
☐ Indirect drain for the three-comp	partment sink
☐ Food preparation sink (if application)	able)
☐ Water pump and hot water heater	er
☐ All equipment in unit, including	, but not limited to: (a) Type/model of
refrigeration and freezer equipm	ent, (b) Cooking equipment, (c) Hood vent,
etc.	
$\Box$ Fresh water tank: size (L x W x	D) and location
☐ Waste water tank: size (L x W x	D) and location
E. Plan Review Worksheet	
☐ Table 1 Food Handling Procedu	res
☐ Table 2 Material List	
☐ Table 3 Refrigeration/Freezer C	apacity
☐ Table 4 Hot Holding Units	
☐ Table 5 Plumbing (indirect drain	n, etc.)
☐ Table 6 3-Compartment Sink M	easurements
☐ Table 7 Fresh Water Tank Meas	
☐ Table 8 Waste Water Tank dime	ensions
☐ Table 9 Operating Schedule	
-	
F. Waste Water Disposal Form (if need	
G. Restroom Agreement Form (if neede	
H. Commissary (Commercial Kitchen)	Verification Form
I. Cooling Plan and Logs (if needed)	

#### **General Requirements and Limitations**

**Mobile Unit:** A mobile food unit is defined in OAR 333-150-0000, 1-201.10 as "...any <u>vehicle</u> that is self-propelled or that can be pulled or pushed down a sidewalk, street, highway or waterway, on which food is prepared, processed or converted or which is used in selling and dispensing food to the ultimate consumer."

Classifications: There are four types of mobile food units. The mobile food unit classifications are based upon the type of **menu served**. Failure to obtain approval for a menu change after it has initially been approved may result in closure of your unit.

**CLASS I** - These units can serve only intact, packaged foods and non-potentially hazardous drinks. No preparation or assembly of foods or beverages may take place on the unit. Non-potentially hazardous beverages must be provided from covered urns or dispenser heads only. No dispensed ice is allowed.

**CLASS II** - These units may dispense unpackaged foods. However, no cooking, preparation or assembly of foods is allowed on the unit. No self-service by customers is allowed.

**CLASS III** - These units may cook, prepare and assemble food items. However, cooking of raw animal foods on the unit is not allowed.

**CLASS IV** - These units may serve a full menu.

**Maintained as Approved:** Mobile food units must be maintained and operated as originally designed and approved. Units that have been modified without approval must revert to the approved design and operation. OAR 333-162-0020

**Wheels:** Mobile food units must remain mobile at all times. The wheels of a mobile food unit must be functional and appropriate for the type of unit and may not be removed at the operating location. OAR 333-162-0030

**Designed in One Piece:** Mobile food units must be designed and constructed to move as a single piece. Mobile food units may not be designed to be assembled at the operating location. See OAR 333-162-0020 for exceptions.

**Integral:** All operations and equipment must be integral to the mobile food unit. Integral means rigidly and physically attached to the unit without restricting the mobility of the unit while in transit. The following exceptions are allowed:

<u>Auxiliary Storage</u>: A mobile unit may provide auxiliary storage outside the unit to support daily operations if:

- Items are limited to what is necessary for that day's operation.
- At the end of the workday, auxiliary storage must be placed in the unit, in a licensed warehouse or at a licensed commissary.
- No self-service, assembly or preparation activities may occur from auxiliary storage containers.

• Refrigerators and freezers may not be placed outside the mobile food unit for use as auxiliary storage and must be located in the unit, in a licensed warehouse or at a licensed commissary.

<u>Shelves and Tables:</u> Mobile food units may use small folding shelves or tables that are integral to the unit to display non-potentially hazardous condiments and customer single-use articles such as napkins and plastic utensils. OAR 333-162-0020

Non-PHF Display: Mobile food units may display commercially packaged, non-potentially hazardous food items, such as cans of soda or bags of chips, off the unit if limited to what can be served or sold during a typical meal period. OAR 333-162-0020

Cooking Units: Class IV mobile food units may use one cooking unit, such as a BBQ or pizza oven, that is not integral to the unit. The cooking unit may not be a flat top grill, griddle, wok, steamtable, stovetop, oven or similar cooking device. The cooking unit must be able to move with the unit. OAR 333-162-0020

**Exterior Protection:** Mobile food units must be secured and protected from contamination when not in operation. OAR 333-162-0680

Water and Sewer Capacity: Mobile food units must be designed with integral water and sewer tanks on the unit. A mobile food unit may connect to water and sewer if it is available at the operating location, however tanks must always remain on the unit. A unit cannot connect directly to fresh water without a direct connection to sewer as well. OAR 333-150-0000, Section 5-305.11

**Restroom Distance:** If a unit is parked in the same location for more than two hours, a restroom must be provided that is located within 500 feet of the unit. OAR 333-150-0000, Section 6-402.11

**Seating:** Mobile food unit operators may provide seating for customers if a readily accessible restroom and sufficient refuse containers with lids or covers are provided. OAR 333-162-0020

**Commissary:** A mobile food unit is required to operate from a licensed commissary or warehouse unless the unit contains all the equipment and utensils necessary to assure the following:

- (a) Maintaining proper hot and cold food temperatures during storage and transit;
- (b) Providing adequate facilities for cooling and reheating of foods;
- (c) Providing adequate handwashing facilities;
- (d) Providing adequate warewashing facilities and assuring proper cleaning and sanitizing of the unit:
- (e) Obtaining food and water from approved sources;
- (f) Sanitary removal of waste water and garbage at approved locations.

A mobile food unit may <u>not</u> serve as a commissary for another mobile food unit or as the base of operation for a caterer. OAR 333-162-0040

**Warehouse**: A warehouse may be used for storage of only unopened packaged foods, single service articles, utensils and equipment. Activities such as handling of unpackaged food, dishwashing and ice making are prohibited in a warehouse. OAR 333-162-0940

Catering and Delivery: A mobile food unit may not provide catering services unless:

- 1) The unit operates from a licensed commissary; or
- 2) The unit has commercial-grade refrigeration equipment, has obtained a variance from the Oregon Health Authority, and uses only single-use articles for service to customers. OAR 333-162-0030

Finally, while this document contains some detailed information about the rules for the construction and operation of mobile food units, it does not contain all the requirements for your unit. Please refer to the Food Sanitation Rules <a href="https://www.healthoregon.org/foodsafety">www.healthoregon.org/foodsafety</a>.

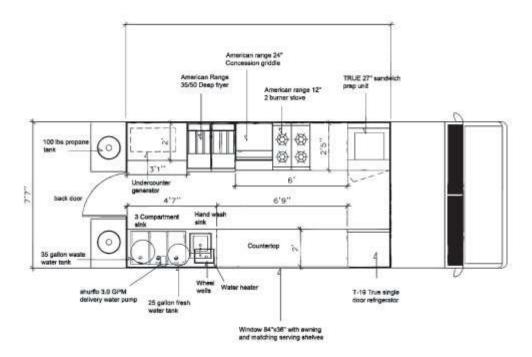
Requirements	Class I	Class II	Class III	Class IV
Water Supply Required	No	Yes	Yes	Yes
Handwashing System Required	No	Yes <sup>1</sup>	Yes <sup>1</sup>	Yes <sup>1</sup>
Dishwashing Sinks Required	No	No <sup>2</sup>	Yes – Or Licensed Commissary <sup>2</sup>	Yes <sup>2</sup>
Assembly or Preparation Allowed	No	No	Yes	Yes
Cooking Allowed	No	No	Yes <sup>3</sup>	Yes
Off-Unit Cooking Operation Allowed	No	No	No	Yes
Restroom Required	Yes	Yes	Yes	Yes
Examples	Prepackaged Sandwiches/ Dispensed Soda	Service of Unpackaged Food Items	Espresso/ Hot Dogs	No Menu Limitation

<sup>&</sup>lt;sup>1</sup>The handwashing system must be plumbed to provide hot and cold or tempered running water and a minimum of 5 gallons of water must be dedicated for handwashing.

<sup>&</sup>lt;sup>2</sup>Must provide a minimum of 30 gallons of water for dishwashing or twice the capacity of the three compartment sinks, if provided.

<sup>&</sup>lt;sup>3</sup>May only cook foods that are not potentially hazardous when raw (rice, pasta, etc.). Animal foods must be pre-cooked.

#### \*FLOOR PLAN LAYOUT EXAMPLE:



Note: Your floor plan does not need to be an engineer's copy, but it must have all the required information from Tables 2-8 clearly shown.

## E: Plan Review Worksheet Tables 1-9

Table 1: Food Handling							
Procedu	res	Yes / No	Procedur	here Will e Take Place			
			Mobile	Commissary			
Washing fruits and/or vegetables	3	□ Yes □ No					
Thawing frozen foods <sup>1</sup>		□ Yes □ No					
Food preparation - chopping, par	r-cooking, marinating,						
Cooking food		☐ Yes ☐ No					
Cooling food <sup>2</sup>		☐ Yes ☐ No					
Reheating food		☐ Yes ☐ No					
Refrigeration (cold holding) of for	□ Yes □ No						
Steam table or other way of hot l							
a. I have a licensed commiss b. I will be using a commerce c. I am providing a written of this option, you must provid your packet.  Explain what you will do with left.  Will raw or undercooked animal products that will be served raw  Will any food items be held with specific food items held out of te	etial refrigeration unit(stooling procedure according procedure according et a written procedure eftover foods:  products be served?  or undercooked (example)  nout temperature contremperature during server.	s) on the mobile unicompanied by cooling for each food item y  Yes No If yes, apple: eggs, ground be olduring service?	g logs for apyou will be obtained by the specific list list the specific list list list list list list list list	cooling with			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Table 2: Material List  Describe surface finishes used on floors, walls, ceilings and countertops.							
Material Type	Counters	Floors	Walls	Ceiling			
Fiber-reinforced plastic (FRP)				8			
Stainless Steel							
Vinyl							
List other construction materials	used:						
Are windows and/or doors screen (Attach your procedures for pest		no, how will you co	ntrol for pes	st problems?			

<b>Table 3: Refrigerator/Freez</b>	er Capa	city				
Unit Type		Yes /	' No	Make/Model of Unit	# of units	Power Source Electric (E) Generator (G) Propane (P) Other (O)
Reach in refrigerator (under o	counter)		□ No			
Refrigerator (stand up)		□ Yes	□ No			
Prep top sandwich refrigerato	or		□ No			
Reach-in freezer (under coun	ter)	□ Yes	□ No			
Freezer (stand up)		□ Yes	□ No			
Fridge/Freezer (stand up)		□ Yes	□ No			
Other cold holding storage		□ Yes	□ No			
Do you have thermometers in	side eacl	ı h refrige	erator	and freezer: ☐ Yes	□ No	<u> </u>
temperature control. OAR 333  Table 4: Hot Holding Units	-102-088	) 				Dorres C
		Yes / No		Make/Model of Unit		Power Source
Unit Type	Yes /	No	Mal	ke/Model of Unit	# of units	Electric (E) Generator (G) Propane (P) Other (O)
Unit Type Steam Tables	Yes /	No No	Mal	ke/Model of Unit	_	Generator (G)
			Mal	xe/Model of Unit	_	Generator (G) Propane (P)
Steam Tables	☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	□ No			units	Generator (G) Propane (P)
Steam Tables Other Hot Holding Storage What type of ventilation syste	☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	□ No □ No □ No ou have?	? ПТуу	pe 1 hood □Type 2 h	units	Generator (G) Propane (P) Other (O)
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink	☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	□ No □ No □ No ou have?	? □Ty	pe 1 hood □Type 2 h	units	Generator (G) Propane (P) Other (O)
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink Indirect plumbing on	Yes Yes em do yo be:	□ No □ No □ u have?  ovide re □ No	? □Ty	pe 1 hood  Type 2 h	units	Generator (G) Propane (P) Other (O)
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink Indirect plumbing on three-compartment sink	☐ Yes☐ Yes☐ Yes☐ Yes☐ tand pro☐ Yes☐	No	P Ty	pe 1 hood  Type 2 h	units	Generator (G) Propane (P) Other (O)  ther system
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink Indirect plumbing on	☐ Yes☐ Yes☐ Yes☐ Yes☐ and pro☐ Yes☐ Yes☐ Yes☐	No No No No No No No No	equired Food plum Back	pe 1 hood  Type 2 h	units	Generator (G) Propane (P) Other (O)  ther system
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink Indirect plumbing on three-compartment sink P-trap (not required)	☐ Yes	ovide re	equired Food plum Back Mech	pe 1 hood  Type 2 h	units	Generator (G) Propane (P) Other (O)  ther system  Yes No
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink Indirect plumbing on three-compartment sink P-trap (not required) Handwashing sink Hot & cold water  Table 6: Three-Compartment Provide interior of sink basing	Yes  Yes  m do you be:  it and pro Yes  Yes  Yes  Yes  Yes  Yes  Yes  Sinks  sinks  sinks	ovide re No	Food plum Back Mech Hot v	pe 1 hood  Type 2	units  lood O  th indirect  ice	Generator (G) Propane (P) Other (O)  ther system  Yes   No   Yes   No   Yes   No   Gallons?
Steam Tables Other Hot Holding Storage What type of ventilation syste If other system, please describ  Table 5: Plumbing Fixtures Check items in the mobile un Three-compartment sink Indirect plumbing on three-compartment sink P-trap (not required) Handwashing sink Hot & cold water  Table 6: Three-Compartment	Yes  Yes  m do you be:  it and pro Yes  Yes  Yes  Yes  Yes  Yes  Yes  Sinks  sinks  sinks	ovide re No	Food plum Back Mech Hot v	pe 1 hood  Type 2	units  lood O  th indirect  ice	Generator (G) Propane (P) Other (O)  ther system  Yes No Yes No Yes No Gallons?

XXII '11 1 ' C '	1 , 1 , 1 , 1						
Where will washing of equipment							
☐ Mobile unit three-compartment sink¹							
	☐ Licensed Restaurant or Commissary  Provide LxWxD for the interior basins of the three-compartment sink. Provide separate						
measurements of each sink basin i			de separate				
To determine the minimum amount			ng purposes, you need to				
calculate the capacity of your three							
amount of water that must be prov	basin in inches, then multiply Length x Depth x Width = $\_\/231 \times 6 = \_\$ gal. This is the minimum amount of water that must be provided for dishwashing.						
For example: If sinks are $10 \times 10$							
<b>Note:</b> All sinks must provide water 333-150-0000, 5-203.11	under pressure of a leas	t 20 PSI. Gravity fe	ed is not allowed. OAR				
Table 7: Fresh Water Tank – M	ust Be Translucent						
<b>Dimensions of Fresh Water Tan</b>	k (in inches)						
Length	Width	Depth	Capacity in gallons				
Please indicate water dedicated	to the following purpos	es:					
Activity	Required	P	rovided				
Handwashing	Minimum 5 gallons						
Dishwashing (See Table 6)	Minimum 30 gallons						
Cleaning							
Use in product (ex: ice making,							
coffee making)							
Equipment (ex: filling steam							
tables)							
Tank Location:							
Table 8: Waste Water Tank – M	lust he 15% Greater th	an Fresh Water T	'ank				
	ste Water Tank (in inch						
Length	Width	Depth	Capacity in gallons <sup>1</sup>				
		<b>. . . . .</b>	guaran guaran				
Tank Location:							
How will the waste water be removed and where will it be disposed from your waste water tank?							
, , , , , , , , , , , , , , , ,							
Does liquid producing equipment (ex: expresso machine) drain indirectly into the waste water tank?							
☐ Yes ☐ No If yes, list equipment:							
Table 9: Operating Location/Schedule							
Name of your mobile unit:							
☐ I plan to operate at multiple locations							
Operating Location – Address, City, Zip Code:							
If operating at multiple locations, please list location name or address and approximate time and							
dates at each location:							