



Environmental Health Services  
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[www.orangecountync.gov](http://www.orangecountync.gov)

### MOBILE FOOD UNIT/ PUSH CART PLAN REVIEW SUBMITTALS

The following must be provided for Mobile Food Unit/ Push Cart plan review submittals:

- \$100 plan review fee for new mobile food units and push carts.
- A completed MFU/PC Plan Review Application (below)
- A copy of the proposed menu including seasonal examples; indicate which food items will be produced at the commissary; and indicate any food items planned to serve raw, undercooked or not otherwise processed to eliminate pathogens and how that will be disclosed on the sample menu
- Plans of the unit drawn to scale (1/4" = 1 foot; 1 inch = 4 feet), including: equipment locations, a plan and profile view, plumbing schematic (plumbing lines, water heater, potable water tank, water pump, sewer vent, wastewater holding tank, etc.). A plumbing schematic is not required for a pushcart.
- The plans and specifications should include at least the following, but not limited to:
  - Equipment plan with the location of all food service equipment with each piece clearly labeled or an equipment legend
  - Refrigeration and hot-holding equipment
  - Utensil wash sink/dishwasher equipment
  - Food preparation sinks, labeled for usage
  - Hand washing facilities
  - Cabinets/shelves for storing toxic chemicals
- Manufacturer specification/cut sheets for each piece of equipment shown on the plans for all new equipment; all food service/kitchen equipment must be commercial and meet ANSI sanitation standards; if used or existing equipment is used, supply at minimum a list of make and model numbers.
- Commissary agreement (page 7) with ESTABLISHMENT PERMITTEE SIGNATURE
- For your safety, an LP gas inspection and fire inspection of your mobile food unit is strongly recommended. Provide documentation. Contact NCDA at <https://www.ncmhtd.com/NCDACS/Standards/FoodTruck> and your local fire marshal for any suggestions.

### Plan Review Application for Mobile Food Units And Pushcarts

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone 2: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Name of Proposed Unit: \_\_\_\_\_

**Part I. Application for**

- Pushcart –designed to be maneuvered by one person. Serves only hot dogs and pre-packaged drinks and snacks
- Mobile Food Unit –fully enclosed vehicle-mounted unit designed to be readily moved. Requires mechanical refrigeration for potentially hazardous foods

**Applicant Signature:**

STATEMENT: I hereby certify that the information provided within this application is accurate. I understand that :

- any deviation or variance from the information contained in this application may void the operation permit for the unit,
- multiple inspections of the unit may be required,
- if the unit is not in compliance with Rules Governing the Sanitation of Food Service Establishments 15A NCAC 18A .2600, the operation permit will not be issued or may be revoked, and
- approval of these plans and issuance of a permit does not relieve me of the obligation to comply with other applicable code, law, or regulation imposed by other jurisdictions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Applicant / Operator )

**For Pushcart Only:**

Pushcart body

(If prefabricated unit, provide make, model number, and specifications):

\_\_\_\_\_  
Location and description of protected storage location for pushcart when not in use

**For Mobile Food Unit Only:**

Floors: \_\_\_\_\_

Walls: \_\_\_\_\_

Ceilings: \_\_\_\_\_

Countertops: \_\_\_\_\_

Light Shields: \_\_\_\_\_

**Part II. The Unit**

List all food service equipment and attach manufacturer's specification sheets:

Cooking equipment (fryers, grills, etc.):

- \_\_\_\_\_

- \_\_\_\_\_
- \_\_\_\_\_

Cooling equipment (refrigerators, freezers, etc.):

- \_\_\_\_\_

Hot holding equipment (steam tables, hot lamps, etc.):

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Utility sink (*for mobile food unit only*):

- Size of vat (Length x Width x Depth) \_\_\_\_\_
- Size of drain boards \_\_\_\_\_

Hand sink (*for mobile food unit only*):

- Size of vat (Length x Width x Depth) \_\_\_\_\_

Wastewater and potable water equipment

- For Mobile Food Unit Only:
- Size (Length x Width x Depth), capacity (gallons), and construction material of
  - permanently mounted wastewater holding tank: \_\_\_\_\_
- Size (Length x Width x Depth), capacity (gallons), and construction material of
  - potable water holding tank: \_\_\_\_\_
  - \_\_\_\_\_
- Type of sewer vent:
  - Vents to exterior (vent protected from rain/vermin)
  - Vents to interior by an air admittance valve
- Attach manufacturer's specification sheet for water pump
- Attach manufacturer's specification sheet for water heater (storage capacity, btu input(gas) / kw input(elec))

**Part III. The Commissary**

Please list all foods for sale and how ingredient will be prepared between the commissary and the MFU/PC including location of preparation and timing of preparation:

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Describe all cold holding in the commissary

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Square feet of reach-in cold storage in commissary:      Square feet of walk-in cold storage:

Reach-in refrigerator storage: \_\_\_\_\_      Walk-in refrigerator storage: \_\_\_\_\_

Reach-in freezer storage: \_\_\_\_\_      Walk-in freezer storage: \_\_\_\_\_

Describe any hot holding in the commissary

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Describe any cooling in the commissary

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Indicate by checking the appropriate boxes how cooked food will be cooled to 41°F within 6 hours. If "Other" is checked indicate type of food:

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Cooling Process	Meat	Seafood	Poultry	Other
Shallow Pans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice Baths	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rapid Chill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe any thawing in the commissary

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Indicate by checking the appropriate boxes how food in each category will be thawed. If "Other" is checked indicate type of food:

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Thawing Process	Meat	Seafood	Poultry	Other
Refrigeration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Running Water less than 70°F (21°C)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooked Frozen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe food handling procedures in the commissary

Explain the following with as much detail as possible. Provide descriptions of the specific areas of the kitchen and corresponding items on the plan where food will be handled.

Explain the handling procedures for the following categories of food. Describe the process from receiving to service including:

- How the food will arrive (frozen, fresh, packaged, etc.)

- Where the food will be stored
- Where (specific pieces of equipment with their corresponding equipment schedule numbers) and how the food will be handled (washed, cut, marinated, breaded, cooked, etc.)
- When (time of day and frequency/day) food will be handled

1. READY-TO-EAT FOOD HANDLING (edible without additional preparation necessary, e.g., salads, cold sandwiches, raw molluscan shellfish)

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2. PRODUCE HANDLING

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3. POULTRY HANDLING

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4. MEAT HANDLING

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5. SEAFOOD HANDLING

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Describe the dry storage in the commissary

Provide information on the frequency of deliveries and the expected gross volume that is to be delivered each time:

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Square feet of dry storage shelf space: \_\_\_\_\_

Where will dry goods be stored?

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Describe the ware washing plans at the commissary

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Will refuse be stored at the commissary?  
If no, where

Yes  No

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Describe the process for obtaining fresh water supply

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Describe the process for discharging gray water

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**COMMISSARY FORM  
PUSHCART / MOBILE FOOD UNIT**

Title 15A North Carolina Administrative Code 18A .2600 "Rules Governing the Sanitation of Food Service Establishments" specifies in section .2670(a) ***A permit shall be issued by the regulatory authority that inspects the commissary from which a pushcart of mobile food unit is to operate, if the regulatory authority determines that the pushcart of mobile food unit complies with the rules of this Section.***

***To be completed by the pushcart/mobile food unit operator:***

- |   |   |
|---|---|
| <input type="checkbox"/> New Application/New Commissary | <input type="checkbox"/> Change of Commissary |
| <input type="checkbox"/> Pushcart                       | <input type="checkbox"/> Mobile Food Unit     |

Name of Pushcart of Mobile Food Unit \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_

***Completed by the permittee or owner of the restaurant located in Orange County***

As the permittee or operator of the establishment noted below, I agree to serve as a commissary for the Mobile Food Unit or Push Cart named above. I understand that as a commissary for the Mobile Food Unit or Push Cart, I must allow the Mobile Food Unit or Push Cart to return for servicing on a daily basis. I agree to allow the following: (Please check all that apply).

- Provide a designated protected area for food and utensil storage, including refrigeration/freezer and dry storage area. I will label those designated spaces for the unit's exclusive use.
- Use of the establishment prep sink to wash utensils used on the unit.
- (Applies to a mobile food unit only) Provide an exterior wastewater collection system for disposal of wastewater.
- (Applies to a mobile food unit only) Provide a protected exterior connection to the potable water supply.
- Provide food preparation equipment/space to support the unit

Name of Establishment Serving as Commissary: \_\_\_\_\_

Establishment ID#: \_\_\_\_\_

Establishment Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Establishment Permittee(Print) \_\_\_\_\_

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**Date**

**Signature of Restaurant Owner/Permittee**