

DEPARTMENT OF PUBLIC HEALTH

Plan Review Application for Mobile Food Units and Pushcarts

MOBILE FOOD UNIT/PUSHCART COMMISSARY AGREEMENT

Pushcarts and mobile food units shall operate in conjunction with a permitted food service establishment and shall report at least daily to the commissary for supplies, cleaning, and servicing.

To be completed by the mobile food unit/pushcart operator:	
Check one: ☐Mobile Food Unit ☐Pushcart	
Name of Mobile Food Unit or Pushcart:	
Operator Name:	
Mailing Address:	
Email:	Phone Number:
Signature of owner/operator or designee:	Date:
Completed by the permittee or owner of the commissar	y located in Cumberland County:
<u>.</u>	nent noted below, I agree to serve a commissary for the Mobile commissary for the Mobile Food Unit or Pushcart, <u>I must allow ervicing on a daily basis.</u>
I will do the following (Initial beside each):	
Provide a designated protected area for food and ute	ensil storage, including refrigeration/freezer and dry storage area.
Label the designated storage spaces for the unit's extended the unit. Provide use of the kitchen facilities including prep sin	clusive use. Provide use of the utensil sink to wash utensils used on nks for food preparation.
Provide an exterior wastewater collection system for disposal of wastewater.	
Provide a protected connection to the potable water supply.	
Provide commissary access for the Mobile Food Un	nit/Pushcart necessary to maintain rule compliance.
Name of Commissary:	
Commissary Address:	
Email:	Phone Number:
Signature of Commissary Owner or Permittee:	Date:
(Office Use Only) Commissary:Approved	Disapproved (give reason)

REHS Signature

By:_____ Date:____