## **FARGO CASS PUBLIC HEALTH**



ENVIRONMENTAL HEALTH
1240 25th Street South
Fargo, ND 58103-2367
Phone 701.241.1360 | Fax 701.298.6929

Fargo Cass Public Health.com

## **MOBILE FOOD/CONCESSIONS PLAN REVIEW APPLICATION**

This application along with a sketch of the layout *must* be completed and returned to Fargo Cass Public Health Environmental Division **prior** to any plan review

		MOBILE/CO	NCESSIONS				
☐ Truck	☐ Trailer	☐ Concessions	☐ Cart	☐ Table Stand	[	☐ Cate	erer
Name of Establi	shment:						
Doing Business	As:						
Commissary Loc	cation:						
Phone Number							
Name of Owner:							
Email Address:							
Billing Address:							
Projected Open	ing Date:						
Consumer Advi	sory				Yes	No	N/A
Are any food items able to be ordered raw or undercooked?							
Is there a consumer advisory statement (with asterisk) present on each page of the menu that contains food items that may be ordered raw or undercooked?							
Is an asterisk present on each menu item that may be ordered raw or undercooked?							
Specialized Pro	cess					Yes	No
		utilized, such as, but	not limited to:				
smoking for pre	smoking for preservation, reduced oxygen packaging, sous vide, pickling, etc.?						
If yes, please de	scribe:						
Pest Manageme	ent						
Describe your pest management control plan for the mobile setup (if applicable):							

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Cooking Processes	Yes	No
Will the mobile setup serve only pre-packaged Time and Temperature Control for Safety		
(TCS) food and/or prepare non-TCS food?		
Will the mobile setup cut leafy greens, melons, or tomatoes?		
Will the establishment prepare, cook, and serve TCS food?		
(This process allows for hot and/or cold holding after preparation or cooking.)		
TCS products include but are not limited to meat, dairy, pasta, rice, eggs.		
Will the establishment cook, cool, and reheat TCS food?		
Please list food items that will be cooked, cooled, and reheated		
(Examples: pasta, rice, proteins, soup, etc.):		
Please describe the process for cooling food items:		□ N/A
Please describe the process for reheating food items:		□ N/A
Food Supplies		
All food supplies must be from inspected and approved sources.		
Provide names of food supplier(s), delivery company, etc.:		
Trovide names of food supplier(3), delivery company, etc		

Employee Training		No
Will employees be trained on all the following?		
Proper handwashing		
No bare-hand contact with ready-to-eat foods		
Food safety		
Food allergy awareness		
Food defense from intentional contamination		
Preventative controls		
Corrective actions		
Illness reporting		
No unnecessary persons in the food areas		

Proposed menu
Commissary Contract (if applicable)
Sketch of proposed layout
Employee Health Policy and Food Employee Reporting Agreement
As per 2-201.11 of the 2013 FDA Food Code: "The PERMIT HOLDER shall require FOOD EMPLOYEES and CONDITIONAL EMPLOYEES to report to the PERSON IN CHARGE information about their health and activities as they relate to diseases that are transmissible through FOOD. A FOOD EMPLOYEE or CONDITIONAL EMPLOYEE shall report the information in a manner that allows the PERSON IN CHARGE to reduce the RISK of foodborne disease transmission, including providing necessary additional information, such as the date of onset of symptoms and an illness, or of a diagnosis without symptoms"
OR
Employee Health Policy and Food Employee Reporting Agreement
Establishment applicant would like to use the Employee Health Policy and Food Employee Reporting agreement developed by Fargo Cass Public Health
HACCP plan for specialized processes (if applicable)

The approval of this form and related documents by Fargo Cass Public Health does not indicate compliance with other codes, laws, or regulations required by fire, building, electrical, plumbing, municipal, etc.

A pre-operational inspection of an establishment prior to opening is necessary to determine compliance with 2013 FDA Food Code.

The 2013 FDA Food Code can be downloaded at the following link:

https://www.fda.gov/Food/GuidanceRegulation/RetailFoodProtection/FoodCode/ucm374275.htm

The undersigned is familiar with the 2013 FDA Food Code and further attests that the facility for which application is made will be operated in compliance with City ordinances and the above-mentioned document.

Signature of Applicant	Date

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