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Brenden Al Bedard, MPH
Deputy Public Health Director

Mobile Food Operation Plan Checklist

1. Physical plan/photographs of mobile operation are attached.
2. Water source for hand washing and sanitation will be drawn from:

3. Wastewater will be retained in holding tanks and disposed of at:

4. Hand washing will be done:

5. Food supplies will be obtained from approved sources:

<u>Menu Item:</u>	<u>Approved Source:</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

*** Attach separate sheet as needed**

5A. Commissary _____

6. Onsite method of cold storage: _____
 _____ Powered by: _____

7. Onsite Method of hot prep: _____

8. No long term storage of potenti ally hazardous food items will be undertaken.

9. Single serve tableware will be used.

10. Trash will be collected and removed for disposal in an approved manner.

11. The trailer/mobile unit work surfaces , floors and equipment will be cleaned and sanitized daily.

12. Chapter 1 State Sanitary Code, Subpart 14-4 will be followed and used as guidance in all actions not specifically addressed in this **plan**.

Signature: _____

Date: _____