



Buncombe County Health and Human Services

Public Assistance & Work Support Strategies ~ Public Health ~ Social Work Services ~ Veterans Services

Stoney Blevins
Health and Human Services Director

APPLICATION FOR MOBILE FOOD UNIT OR PUSHCART OPERATIONAL PERMIT

A Commissary form must be submitted to Buncombe County Environmental Services and have been approved by this Department prior to submitting this application.

The North Carolina Rules Governing the Sanitation of Food Service Establishments (15A NCAC 18A .2600) require that plans be submitted for approval to the local Health Department (Buncombe County Environmental Services) when applying for an operational permit for a mobile food unit or pushcart. Incomplete applications and plans will be returned to the applicant and will delay processing.

Applicants Name:

Home Address:

City: _____ North Carolina Zip Code: _____

Home Phone: _____ Cell/Work Phone: _____

Email Address:

Application for (choose one):

_____ Pushcart – designed to be maneuvered by one person. Only hot dogs can be prepared and served on this unit. Pre-Packaged items such as canned drinks and bagged chips may be sold from this unit.

_____ Mobile Food Unit – vehicle-mounted food service establishment designed to be readily moved. It is a self-contained restaurant on wheels that is fully enclosed with floors, walls, and ceilings. Mechanical refrigeration is required for the cold storage of opened and potentially hazardous foods.

Name of Proposed Unit: _____

COMMISSARY FORM

P.O. Box 7408, Asheville, NC 28802
(828) 250-5500

buncombecounty.org

In accordance with Federal law and U.S. Department of Agriculture (USDA) and U.S. Department of Health & Human Services (HHS) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. Under the Food Stamp Act and USDA policy, discrimination is prohibited also on the basis of religion or political beliefs.



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PUSHCART/MOBILE FOOD UNIT

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

Check one:

_____ New Application/New Commissary (must submit service request form also)

_____ Change of Commissary (01011 _____)

Check one:

_____ Pushcart Name: _____

_____ Mobile Food Unit: _____

VIN # of unit: _____

Your Name: _____ Telephone#: _____

To be completed by the restaurant permittee or operator:

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

_____ (Applies to a mobile food unit only) Provide an access to an approved sewage disposal system for the disposal of wastewater.

_____ (Applies to a mobile food unit only) Provide access to a potable water supply.

_____ (Applies to a mobile food unit and pushcart) Use designated refrigerated or dry storage area for food or utensil storage.

_____ (Applies to a mobile food unit and pushcart) Use of the restaurant utensil sink to wash utensils used on the unit.

Name of Restaurant Serving as Commissary: _____



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Restaurant Address: _____ City: _____ Zip Code: _____

Restaurant Phone Number: _____ Restaurant Permit Holder: _____

SIGNATURE OF RESTAURANT PERMIT HOLDER OR OPERATOR DATE

(OFFICE USE ONLY)

COMMISSARY:

_____ APPROVED
_____ DISAPPROVED

GIVEN

REASON: _____

_____.

BY: _____ DATE: _____

REHS SIGNATURE

REHS CALLE APPLICANT _____ REHS UPDATED DHD _____ REHS RETURNED FORM _____

COMMISSARY ID#: 01011 _____



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MOBILE FOOD UNIT/PUSHCART CONSTRUCTION DETAILS

Describe Construction Materials:

Pushcart Only-

Pushcart Body: _____

Describe protected storage area for cart when not in use: _____

Mobile Food Unit Only-

Floors: _____

Walls: _____

Ceilings: _____

Countertops: _____

Light Shields: _____

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

Cooking Equipment (fryers, grills, etc.):

- _____
- _____
- _____
- _____

Cooling Equipment (refrigerators, freezers, etc.):

- _____
- _____
- _____
- _____



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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 drainboards _____

Handsink (for mobile food unit only):

- Size of vat (length x width x depth) _____

Describe wastewater and potable water holding 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 permanently mounted potable holding tank:

- Type of sewer vent:
_____ Vents to exterior (vent protected from rain/vermin)
_____ Vents to interior by an air admittance valve (commonly known as a "studor" vent)
- Attach manufacturer's specification sheet for water pump _____
- Attached manufacturer's specification sheet for hot water heater _____



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Proposed Operational Locations, Dates, and Times: _____

_____.

Attach All Items Listed in Submittal Checklist (next page of application)

APPLICATIONS WITH SUPPORTING DOCUMENTATION SHOULD BE MAILED TO BUNCOMBE COUNTY ENVIRONMENTAL SERVICES, PLAN REVIEW MFU/PUC, 30 VALLEY STREET, ASHEVILLE, NC 28801 OR CAN BE HAND DELIVERED TO BUNCOMBE COUNTY ENVIRONMENTAL SERVICES AT THE SAME ADDRESS (WE ARE CO-LOCATED WITH BUNCOMBE COUNTY BUILDING INSPECTIONS).

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SUBMITTAL CHECKLIST

All documents below must be submitted to Buncombe County Environmental Services for review when applying for an operational permit for a mobile food unit or pushcart.

_____ Completed Application for Mobile Food Unit or Pushcart Operational Permit

_____ Plans of the unit drawn to scale (1/4" = 1 foot). For example, 1 inch= 4 feet. Including: equipment locations, a plan (top down) view, operator's view from inside unit, and a side view plumbing schematic (plumbing lines, hot water heater, potable water tank, water pump, sewer vent, wastewater holding tank, etc.). A plumbing schematic is not required for a pushcart.

_____ Manufacturer's specification sheets for all proposed food service equipment

_____ Signed and date menu (including all food, drinks, and condiments). Any menu changes must be approved by this office.

Applicant Signature:

Statement- I hereby certify that the information provided within this application is accurate and fully understand that any deviation or variance from this application without prior written permission from Buncombe County Environmental Services will prevent issuance of an operational permit for the unit. I understand that this application will be returned to me incomplete and will delay processing. I also understand that multiple inspections of the unit may be required and that if the unit is not in compliance with Rules Governing the Sanitation of Food Service Establishments 15A NCAC 18A .2600, an operational permit will not be issued. Approval of these plans and specifications by Buncombe County Environmental Services does not indicate compliance with any other code, law or regulation that may be required (i.e. federal, state, or local).

Signature of Owner/Operator or Designee

Date