

**PLANS AND SPECIFICATIONS MUST BE APPROVED BEFORE CONSTRUCTION AND RENOVATION BEGINS.**

Louisiana Administrative Code Title 51, Part XXIII, Chapter 3, §307.A.

**OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Plan Log No.: \_\_\_\_\_

(mfePRQ( 2013-01)

Rev. 10/2020

## Mobile Food Establishment: Plan Review Questionnaire

### Instructions:

This questionnaire must be completed to the best of your knowledge and submitted to the parish sanitarian office for review prior to applying for a permit to operate a Mobile Food Establishment (MFE; also known as a Mobile Food Unit or Mobile Unit; see Definitions on Page 11).

In addition, a floor plan of the Mobile Food Establishment (Attachment A) and a layout of the Commissary and MFE Servicing Area (Attachment C) must be provided with the completed questionnaire.

[For help completing this form and speeding up review, please see Sanitary Code links (Page 5), Definitions (Page 11), and Commissary Checklist (Page 12).]

1. Name (Doing Business As) of MFE:

\_\_\_\_\_

2. Name of MFE Owner(s): \_\_\_\_\_

3. Name of Corporation, Partnership, LLC, or LLP (if applicable): \_\_\_\_\_

\_\_\_\_\_

4. If a partnership, list partner name(s): \_\_\_\_\_

\_\_\_\_\_

5. MFE Owner Contact Information: Home: (\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

6. Physical Address where MFE is parked/stored when not in use: \_\_\_\_\_

\_\_\_\_\_

7. Vehicle License Plate Number: \_\_\_\_\_

VIN: \_\_\_\_\_

8. Type of MFE (check one; see Definitions on Page 10)

Independent/Self-Sufficient Vehicle or Trailer

Dependent Vehicle or Trailer

Push-Cart

Pre-Packaged, Non-Potentially Hazardous Food Push-Cart

Other (describe): \_\_\_\_\_

9. Name and Telephone Number of Person in Charge at MFE during its hours of operation: \_\_\_\_\_

\_\_\_\_\_

10. Location, Days, and approximate Times of Operation for the MFU. (Note: Any changes to these must be submitted to and approved by the local sanitarian office prior to changes.):

Location(s): \_\_\_\_\_

Days: \_\_\_\_\_

Hours of Operation:

\_\_\_\_\_

11. Anticipated Number of Meals/Servings per Day: \_\_\_\_\_

12. Commissary Contact Information

Name of Commissary: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Permit Number: \_\_\_\_\_

13. Name and Telephone Number of Person in Charge at the Commissary: \_\_\_\_\_

14. How many miles away from the commissary will the MFE operate?

15. MFEs are required to return to the Commissary daily for servicing. Indicate the time(s) of day the MFE returns to the Commissary for servicing. (Note: Any changes to service schedule must be submitted to and approved by the local sanitarian office prior to changes.): \_\_\_\_\_

16. Will all the foods be prepared at and stored on the MFE?

YES Complete Attachment B, Food Preparation at the MFE

NO Complete Attachment D, Food Preparation at the Commissary and Attachment B Food Preparation at the MFE

17. List ALL food and beverage items to be prepared and/or served at the MFE. Attach a separate sheet if necessary. (Note: Any changes to the menu must be submitted to and approved by the local sanitarian office prior to changes.):

18. List ALL food and beverage items prepared at the Commissary: \_\_\_\_\_

19. Identify Source(s) of all food and drink items, including ice (if applicable): \_\_\_\_\_

20. A. If you use menus and serve crawfish or shrimp that originates in a foreign country, you must indicate on the menu its country of origin or use the term "imported" immediately adjacent to the menu item. Alternately, if menus are not used, a sign must be posted at the main entrance to the establishment that states, "Certain crawfish and shrimp originate from a foreign country". The sign must be 18 inches tall and 18 inches wide, written in English letters at least one (1) inch in size and posted in a conspicuous location not less than thirty-six inches from the floor. Will you serve crawfish or shrimp that originated in a country other than the United States?

YES

NO

20. B. Will you serve raw oysters?      **Yes**      No

Note: You must indicate on the menu, on placards, at any point of sale, clearly visible messages to the consumer either of the following advisories regarding the consumption of raw oysters and other protein products.

LAC Title 51, Part XXIII, §1109. A.

1. "THERE MAY BE A RISK ASSOCIATED WITH CONSUMING RAW SHELLFISH AS IS THE CASE WITH OTHER RAW PROTEIN PRODUCTS. IF YOU SUFFER FROM CHRONIC ILLNESS OF THE LIVER, STOMACH OR BLOOD OR HAVE OTHER IMMUNE DISORDERS, YOU SHOULD EAT THESE PRODUCTS FULLY COOKED"; or  
2. "CONSUMING RAW OR UNDERCOOKED MEATS, POULTRY, SEAFOOD, SHELLFISH OR EGGS MAY INCREASE YOUR RISK OF FOODBORNE ILLNESS, ESPECIALLY IF YOU HAVE CERTAIN MEDICAL CONDITIONS."

21. List the equipment and procedures used in the MFE to maintain temperatures of Potentially Hazardous Food and Time/Temperature Control for Safety Food (PHF/TCS; see Definitions on Page 11). Use separate sheet if necessary.

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22. Tell how ready-to-eat foods (examples: salads, sandwiches, commercially-packaged foods) are protected from PHF/TCS (example: raw meats and seafood) during storage, transportation, preparation and cooking by food workers at the MFE:

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23. Where will non-food items (paper products, utensils, etc.) be stored on the MFE?

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- 24. Identify the source of the potable water and describe how potable water will be provided on the MFE including the capacity of potable water tank(s). \_\_\_\_\_  
\_\_\_\_\_
- 25. Describe the procedures for cleaning and refilling the potable water tank(s). \_\_\_\_\_  
\_\_\_\_\_
- 26. Identify the location, source, and capacity of the hot water supply for the MFE. \_\_\_\_\_
- 27. Where will pots, food containers, and utensils be washed, rinsed, and sanitized? \_\_\_\_\_
- 28. Where will pots, food containers, and utensils be stored? \_\_\_\_\_
- 29. What type of sanitizer will be used on the MFE? \_\_\_\_\_
- 30. Indicate the capacity of the wastewater storage tank(s)? \_\_\_\_\_
- 31. How and where will the wastewater tank(s) be emptied at the Commissary Servicing Area? \_\_\_\_\_
- 32. Identify the location of toilet facilities for the MFE workers during operation. \_\_\_\_\_
- 33. Describe the number, location, and types of garbage disposal containers on the MFE. Identify how, when, and where the garbage disposal containers will be emptied and cleaned. \_\_\_\_\_  
\_\_\_\_\_
- 34. Describe the finishes of the walls, floor, and ceiling of the MFE. \_\_\_\_\_  
\_\_\_\_\_
- 35. Describe how electricity, gas, propane, and other utilities will be provided to the MFE. \_\_\_\_\_  
\_\_\_\_\_
- 36. Louisiana law requires a Louisiana Department of Health Food Safety Manager Certificate verifying an owner or employee has been certified as a Food Safety Manager for facilities preparing food. See requirements and exemptions link below. Do you employ a Food Safety Manager with a current LDH Food Safety Certificate?  
YES NO Certificate # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Name of Certificate Holder: \_\_\_\_\_  
If no, has a Food Safety Course been scheduled? (Provide details)  
YES NO Name of Provider and Date of Course: \_\_\_\_\_

A list of Food Safety Course Providers is available at this link:  
<http://new.dhh.louisiana.gov/index.cfm/page/632/n/228>

36. I have received a copy of Act 66.  YES  NO \_\_\_\_\_ (Signature required)  
See page 12.

Statement: I hereby certify that the above information is correct and I fully understand that any deviation from the above without prior permission from the parish sanitarian office may nullify final approval.

Signature(s): \_\_\_\_\_

Printed Name(s): \_\_\_\_\_

Date of Submission: \_\_\_\_\_

Permits are not transferable. After permitting, any change in operation requires notification be made to the Louisiana Department of Health Environmental Office and may require submission of a modified plans review packet. Substantial renovation is defined in the definitions section of the Sanitary Code Retail Food Part XXIII.

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***Contacts and important information:***

State Sanitarian located in the Parish you wish to operate: <http://www.dhh.louisiana.gov/index.cfm/page/394>

Louisiana Administrative Code Title 51 (Public Health Sanitary Code), Part XXIII Retail Food Operations: <http://doa.louisiana.gov/osr/lac/51v01/51.doc>

Application for LDH Food Safety Manager Certificate and list of approved Food Safety Course providers: <http://new.dhh.louisiana.gov/index.cfm/page/632/n/228>



**Attachment A (Page 2 of 2)**

**Proposed Floor Layout – Mobile Food Establishment**

In the following space or on an attached sheet, provide a scaled plan layout for the MFE. Identify and describe all equipment including cooking equipment and hot and cold holding equipment, hand washing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, and customer service areas. (Attach additional sheets if necessary.)





### **Attachment C**

#### **Floor Layout - Commissary and Service Area**

In the following space, provide a scaled layout of the Commissary and Mobile Food Establishment Servicing Area. Identify and describe all equipment at the Commissary including cooking equipment and hot and cold holding equipment, hand washing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, potable water supply connection, and waste water disposal system and connection. (Attach additional sheets if necessary.)

**Attachment D**

**Food Preparation at the Commissary**

List each food item and its preparation procedures that will take place at the Commissary.

<b>FOOD</b>	<b>THAW</b> How? Where?	<b>CUT/WASH/ ASSEMBLE</b> How? Where?	<b>COLD HOLDING</b> How? Where?	<b>COOK</b> How? Where?	<b>COOLING</b> How? Where?	<b>REHEATING</b> How? Where?	<b>HOT HOLDING</b> How? Where?	<b>DELIVER TO CUSTOMER</b> How? Where?

## **DEFINITIONS**

**Commissary:** a catering establishment, restaurant, or any other properly equipped place in which food, containers, or supplies are kept, handled, prepared, packaged or stored; an operating base location to which a Mobile Food Establishment (MFE) or transportation vehicle returns at least once daily for such things as vehicle and equipment cleaning, discharging liquid or solid wastes, refilling potable water tanks and ice bins, and storing food and supplies. [See also “Checklist for Commissary” on Page 11.]

**Dependent Vehicle or Trailer (not Self-Sufficient):** These units are capable of dispensing hot and cold PHF/TCS and non-PHF/non-TCS foods. They may be capable of hot and cold holding of PHF/TCS foods, but may not have the facilities to cook or reheat food. These units have hand washing facilities, a potable water supply, and containment for wastewater. They may not have utensil washing facilities. The servicing area may have to be used for cooking, re-heating food for hot-holding, cold and frozen food storage, dry goods storage, utensil washing, washing the MFE access to potable water, and the disposal of wastewater and garbage because this type of MFE may not have the facilities for conducting these activities.

**Independent or Self-Sufficient Vehicle or Trailer:** These units are capable of preparing PHF/TCS and non-PHF/non-TCS foods, cooking, hot and cold storage, dry storage, utensil washing, hand washing, etc. on the unit. The unit has a self-contained potable water supply and a wastewater storage system.

**Letter of Agreement:** a document, signed and dated by the Commissary Owner and Mobile Food Establishment Owner, which indicates how the MFE Owner may utilize the Commissary to store food and single-service products, wash and sanitize food containers and equipment, dispose of garbage and food debris, dispose of liquid waste, dispose of unused potable water, empty, disinfect, and fill potable water tank(s), and perform other necessary actions for maintaining equipment and refilling the supplies of the MFE.

**Potentially-Hazardous Food (PHF/TCS):** a food that requires time/temperature control for safety (TCS) to limit pathogenic microorganism growth or toxin formation. Examples include raw meats and raw seafood and food that is cooked, cooled, stored under refrigeration, and reheated.

**Pre-Packaged Push Carts:** These units are limited to ONLY offering commercially prepared, non-PHF/TCS foods. A Servicing Area must be used for food storage and cart cleaning.

**Push Cart:** These units are not self-propelled and must be hauled by a vehicle or pushed-to-move from one location to another. These types of units offer limited PHF/TCS and non-PHF/TCS foods. The units must be designed to safely serve designated food items from the units. These units usually have accessory components such as coolers with ice for cold holding PHF/TCS foods. Hand washing stations must be built into the cart. Potable water must be available for food use and for hand washing. A wastewater containment system must be available and used. A Servicing Area must be available and used for cold and frozen food storage, dry goods storage, single-service/single-use storage, utensil storage, utensil washing, cart washing, access to potable water, and the disposal of wastewater and garbage.

**Mobile Food Establishment:** A vehicle-mounted food establishment designed to be readily movable.

**Mobile Retail Food Store/Market:** A vehicle-mounted retail food store/market designed to be readily movable.

### **Checklist for Commissary**

Commissary must have:

1. A Permit to Operate in good standing
2. A Service Area as required in LAC51:XXIII, Chapter 45 (See Sanitary Code link on Page 4)  
Note: Service Area must have, at minimum, the following: safe connection to potable water supply, safe connection to sewage treatment system, and smooth, non-absorbent surface (example: concrete or machine-laid asphalt) in good repair, clean, and graded to drain
3. Other provisions required in LAC51:XXIII, Chapter 45 (See Sanitary Code link on Page 5)

In addition, the MFE Owner must a signed and dated Letter of Agreement (see Definitions on page 11) with the Commissary Owner (if different owners).

[Note: Letter of Agreement must be updated and submitted annually with request for MFE's permit renewal.]

### **ACT 66 NOTICE**

A new Louisiana law, Act 66, authorizes the Louisiana Department of Health to charge a fee of \$150 to any permitted food establishment that fails to correct the necessary sanitary code violations to be in compliance following its 1st re-inspection.

The implementation date is September 1, 2017.

This new law is intended to help prompt facilities to make the necessary corrections and come into compliance as soon as possible to protect public health.

Re-inspections are required when there are five or more uncorrected non-critical violations and/or one or more uncorrected critical violations remaining at the conclusion of an inspection.

The fee is only charged if the necessary violations are not corrected following the 1st re-inspection, resulting in a 2nd re-inspection and possibly other subsequent re-inspections.

Establishments can avoid this fee if the violations noted on the routine inspection report are corrected by, or during, the 1st re-inspection.

The \$150 fee is payable within 30 days' notice, and failure to pay shall result in revocation of the permit.