



Town of Ipswich  
**Board of Health**  
25 Green Street  
Ipswich, MA 01938  
978-356-6605; Fax 978-356-6680

### MOBILE FOOD UNIT/PUSHCART PLAN AND OPERATIONS REVIEW

**Mobile Food Unit** 

**Pushcart** 

Name of Business: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

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

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Title (owner, operator, etc.): \_\_\_\_\_

#### **Base of Operation:**

Name: \_\_\_\_\_

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

City/Town: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Owner/Manager: \_\_\_\_\_

Type of Establishment: \_\_\_\_\_ Permit No.: \_\_\_\_\_

**1. Food Supplies**

1. Are all food supplies (including ice and water) from inspected and approved sources?  
Yes ( ) No ( )

List sources: \_\_\_\_\_

2. Will all pre-packaged food be labeled with the name and address of manufacturer, name of product, list of all ingredients, allergens and net weight?  
Yes ( ) No ( )

3. Will all pre-packaged, potentially hazardous foods (phf's) also be labeled with a sell-by date?  
Yes ( ) No ( )

4. Will daily invoices for all foods being offered be kept on the truck?  
Yes ( ) No ( )

**2. Food Storage**

1. Are adequate mechanical freezer and refrigeration available to maintain:  
frozen foods at 0°F and below? Yes ( ) No ( )  
refrigerated foods at 41°F and below? Yes ( ) No ( )

Number of refrigeration units:  
Number of freezer units:

2. Is each refrigerator/freezer equipped with a thermometer? Yes ( ) No ( )

3. Will raw phf's be stored in the same refrigerators and freezers with cooked/ready-to-eat foods?  
Yes ( ) No ( )

If yes, how will cross-contamination be prevented? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Will all unwrapped foods be protected from dust, road dirt, insects, etc.? Yes ( ) No ( )

If yes, how will the food be protected? \_\_\_\_\_  
\_\_\_\_\_

**3. Construction**

1. Is the unit constructed of safe materials that are durable, smooth, and easily cleanable?  
Yes ( ) No ( )

Describe construction materials: \_\_\_\_\_  
\_\_\_\_\_

2. Is the unit constructed and arranged so that food, drink and utensils will not be exposed to insects, rodents, dust or other contaminants? Yes ( ) No ( )

3. Are protective covers provided for unwrapped foods on display? Yes ( ) No ( )
4. Does the mobile food unit/pushcart have the name and address of the owner or company displayed on either side in letters at least 3 inches in height? Yes ( ) No ( )

**D. Water System/Waste Retention**

1. Is a sink with hot and cold running water under pressure available in the unit for handwashing? Yes ( ) No ( )
2. Are sinks with hot and cold running water under pressure available for washing equipment and utensils? Yes ( ) No ( )

If yes, state dimensions (length x width x height): \_\_\_\_\_

If no, where will equipment and utensils be cleaned and sanitized? \_\_\_\_\_

3. Sanitizing Agent: \_\_\_\_\_ Concentration: \_\_\_\_\_ (ppm)

Are test papers available to measure the strength of sanitizing solution? Yes ( ) No ( )

4. Size of water supply tank: \_\_\_\_\_ gal.

Size of waste retention tank: \_\_\_\_\_ gal.

(NOTE: should be 15% greater than water tank)

5. Is water inlet of supply tank kept capped (while not being filled) and located in such a manner that it will not be contaminated by waste discharge, road dust, oil or grease? Yes ( ) No ( )
6. Is the waste retention tank connection located lower than the water inlet connection? Yes ( ) No ( )
7. How and where will the liquid waste from the retention tank be disposed of? \_\_\_\_\_

**NOTE:** A mobile food unit servicing area must be provided at the base of operation if:

- Unpackaged food is placed on the mobile food unit/pushcart, and/or
- The mobile food unit is equipped with waste retention tanks

**E. Food Preparation**

**Note: Applies only to mobile food units with water systems.** Mobile food units without water systems and pushcarts are limited to the sale of non-potentially hazardous foods, pre-packaged potentially hazardous foods(phfs) and the preparation of hotdogs.

1. List how each category of hot foods will be cooked/reheated.

**NOTE:** Potentially hazardous foods to be served hot must be rapidly reheated to an internal temperature of 165°F within 1 hour.

2. How will hot bulk foods be maintained at 140°F?

3. Will food product thermometers (0-212°F) be used to measure temperatures of phfs after cooking/reheating and during hot holding? Yes ( ) No ( )
4. Will sandwiches, salads and other cold ready-to-eat foods be prepared and/or assembled on-site?  
Yes ( ) No ( )
- If yes, will utensils, disposable gloves, single-service papers etc., be used to minimize food handling?  
Yes ( ) No ( )
5. How will dispensing utensils be stored?
6. How will utensils be cleaned and sanitized if necessary during use?
7. Describe handwashing facility on unit.
8. Will any self-service of bulk foods be allowed? Yes ( ) No ( )
- If yes, how will the food be protected from contamination by the customer? \_\_\_\_\_

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If yes, will a sign be posted to inform the customer that utensils, tissue paper, etc. must be used?  
Yes ( ) No ( )

9. Are all condiments, coffee creamers, sugar etc., individually wrapped or in pour-type dispensers?  
Yes ( ) No ( )
10. Are all single-service articles individually wrapped or stored in sanitary containers? Yes ( ) No ( )
11. Will bulk phfs be discarded at the end of each business day? Yes ( ) No ( )
- How will out of date packaged phfs be handled?

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THIS PLAN REVIEW PACKET:

- **A COPY OF YOUR WRITTEN AGREEMENT WITH A LICENSED COMMISSARY OR LICENSED FOOD ESTABLISHMENT THAT ALLOWS FOR YOUR USE OF THE FACILITY AS A “BASE OF OPERATIONS”.**
- **A COPY OF THE BASE OF OPERATION’S CURRENT FOOD PERMIT.**
- **A COPY OF YOUR HAWKERS & PEDDLERS LICENSE.**
- **A COPY OF THE MOBILE FOOD UNIT’S MOTOR VEHICLE REGISTRATION.**
- **THE FOOD ESTABLISHMENT PERMIT APPLICATION AND FEE.**
- **A LIST OF MENU ITEMS TO BE OFFERED.**
- **A LIST OF LOCATIONS TO BE VISITED IN IPSWICH AND AN ESTIMATED TIME DURING THE DAY FOR EACH LOCATION.**

**AN INSPECTION OF THE MOBILE FOOD UNIT/PUSHCART MUST BE COMPLETED BY THE HEALTH AGENT BEFORE THE MOBILE FOOD UNIT/PUSHCART WILL BE ALLOWED TO OPERATE.**