

Choose one:

☐ **Renewal**

☐ **New**



*Colchester, East Haddam, East Hampton, Hebron, Marlborough, & Portland*

DIRECTOR of HEALTH  
Russell Mehmed, MPH RS

Cash \_\_\_\_\_  
Check # \_\_\_\_\_  
Fee paid \_\_\_\_\_

## **Mobile Food Unit Application 2021**

Name of Mobile Unit \_\_\_\_\_

Trailer License plate # \_\_\_\_\_ (each truck/trailer requires a separate license)

Owner's Name \_\_\_\_\_ Phone \_\_\_\_\_

Owner's  
Mailing Address \_\_\_\_\_

Email address \_\_\_\_\_

**If you did not have MFU license with CHD previously a Mobile Food Unit Plan Review Application must be submitted and approved, a preoperational inspection shall be completed prior to any license issuance.**

**Annually the following must be submitted:**

☐ **Menu**

☐ **Water test**

☐ **CFPM Certificate(s) must be submitted with this application (Class 2, 3 and 4)**

### **CLASS 2, 3 & 4 MOBILE VENDORS MUST COMPLETE THE FOLLOWING:**

Name of Certified Food Protection Manager (CFPM) \_\_\_\_\_

Date of Expiration on Certificate \_\_\_\_\_

**Certificates must be current. Expired certificates will not be accepted. Issue date shall be no longer than 5 years ago.**

The CFPM will be onsite, in a supervisory position with authority, responsible for training all personnel, ensuring safe food handling practices and be in compliance with the 2017 FDA Food Code.

Signature of Applicant or CFPM X \_\_\_\_\_ Date: \_\_\_\_\_

### **-----FOR OFFICAL USE ONLY-----**

#### **Classification:**

##### **Class 1 & 2 FEE \$100**

\_\_\_\_ Class 1- Packaged food or food prepared in establishment that is time and temperature controlled for safety (TCS)

\_\_\_\_ Class 2- Cold food prep and Non TCS, Hot food cook and serve TCS

##### **Class 3 & 4 FEE \$150**

\_\_\_\_ Class 3- Hot food, cook/hold/cool/reheat/serve

\_\_\_\_ Class 4- Serves highly susceptible population or conducts specialized food processes

**Sanitarian Approval/ Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Revised 12/10/2018

Main Office: 240 Middletown Avenue, East Hampton 06424

Tel: (860) 365-0884 • Fax: (860) 365-0885

[www.chathamhealth.org](http://www.chathamhealth.org)