



# Mobile Plan Review Application for Food Service Operations and Retail Food Establishments

Updated 5/22/2023

This plan review application is for mobile food service operations and mobile retail food establishments only. Different applications are available for food service operations, retail food establishments, micro markets, and temporary operations. **There is no plan review fee for mobile operations. Send the completed application and drawings to Lorain County Public Health, 9880 Murray Ridge Rd. Elyria, OH 44035.**

Name of proposed business: \_\_\_\_\_

Business address (street number, city, zip): \_\_\_\_\_

Owner's name: \_\_\_\_\_ Owner's phone#: \_\_\_\_\_

Owner's address (street number, city, zip): \_\_\_\_\_

Owner's email address: \_\_\_\_\_

Owner's preferred method of contact:  Email  Phone call  Text

Address where the unit will be stored: \_\_\_\_\_

Will this unit use a commissary?  Yes  No | Name of commissary: \_\_\_\_\_

Commissary address (street number, city, zip): \_\_\_\_\_

Type of mobile (Choose One):  Trailer  Knock down/Tent  Food truck  Cart

Status of mobile:  The unit is already built  The unit needs to be built by someone else  I'm building the unit | Construction start date if applicable: \_\_\_\_\_ Proposed opening date: \_\_\_\_\_

For fresh water:  Need to be connected to water, or  Have a holding tank, size:

\_\_\_\_\_

For wastewater:  Connect to a sanitary sewer, or  Have a tank, size:

\_\_\_\_\_

Backflow preventer type or number: \_\_\_\_\_

**Draw the plans:** Include all items in the checklist below. The checklist is based on the Ohio Uniform Food Code section 3717-1-09, "Criteria for reviewing facility layout and equipment specifications," which outlines all required information for each plan review. **Failure to include all items will delay the plan review process and may result in plans being disapproved. Starting construction before plan review and approval does not guarantee the facility will be approved as built. Purchasing a used mobile unit does not guarantee plan approval.**

**Include the following in the plans – all are required:**

Per the Ohio Uniform Food Safety Code, the facility layout and equipment specifications submitted for approval must clearly confirm that the code can be met, the facility layout and specifications shall be legible, be drawn reasonably to scale, and include:

- Proposed menu or draft list of food items to be sold (example: pizza, chicken wings)
- Total square footage of the mobile food service operation or retail food establishment
- Site plan showing overhead layout of any tents, trailers, cooking equipment, and any other apparatus used for the mobile unit
- Indoor and outdoor seating areas where applicable
- Entrances and exits
- Location, number, and types of plumbing fixtures – every sink, mop, hand washing, prep station, 3 compartment sink, dish machine
- Water supply facilities – where the water is flowing to (hot and cold water lines and their connections to equipment need to be shown)
- Lighting plan – how many lights and what kind
- Floor plan showing all fixtures and equipment – where every fridge, table, hood system fryer, etc. is located in the space
- Building materials and surface finishes to be used (example: epoxy paint, stainless steel, type of base on the floor)
- Equipment list with manufacturer names and model numbers
- Additional requirements:
  - All cold holding equipment must use only mechanical refrigeration.
  - Any additional support trucks, trailers, side carts, etc. must be included in this plan review.
  - All equipment and proposed food items must be listed in the plan review, as they are required to be posted on the back of the mobile license.

*Approval of plans by LCPH does not indicate compliance with any other code, law, or regulation that may be required (federal, state or local). It further does not constitute endorsement or acceptance of the complete establishment (structure or equipment).*

**By signing, you acknowledge all of the above required information is included with this plan submission. Failure to include all required information will delay the plan review process and may result in plans being disapproved.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Office Use Only**

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

Date Reviewed: \_\_\_\_\_ Initials: \_\_\_\_\_ Date Approved: \_\_\_\_\_ By: \_\_\_\_\_