

**APPLICATION FOR**  
**MOBILE FOOD UNIT / PUSHCART**  
**PERMIT**

In North Carolina no foods can be prepared at home or in any other non-permitted kitchen. Foods must be prepared on the mobile unit, on the push cart (hot dogs only), or in an approved restaurant permitted to prepare food for sale.

A pushcart in North Carolina is defined as, "A mobile piece of equipment or vehicle which serves hot dogs or goods that have been prepared, proportioned and individually pre-wrapped at a restaurant or commissary." This means that only hot dogs can be actually prepared on a pushcart. Pushcarts can also be approved to sell wrapped food items; however, such sales must meet the documentation and labeling requirements in rule.2639 (d), (e), and (f).

A mobile food unit in North Carolina is defined as, "A vehicle mounted food service establishment designed to be readily moved." Mobile food units can be designed to allow the serving of a variety of foods and require the installation of the same types of equipment that one would expect to find in a permanent food service. This includes mechanical refrigeration and an on-board water system with a water heater. Sinks are required, including at a minimum, a handwash sink. Water hose must be approved food-grade.

The operator of the pushcart or mobile food unit **must** provide a list of the locations the units will operate.

**ANY CHANGE IN OWNERSHIP REQUIRES A NEW PERMIT--PERMITS ARE NOT TRANSFERRABLE**

Date of application: \_\_\_\_\_

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

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

Mailing Address: Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone\_(\_\_\_\_)\_\_\_\_\_ E-mail address\_\_\_\_\_

Emergency Phone Number\_(\_\_\_\_)\_\_\_\_\_ Fax Number\_(\_\_\_\_)\_\_\_\_\_

Where exactly will food and supplies be stored in the Restaurant? \_\_\_\_\_

What time of day will you be at the restaurant servicing your unit / preparing food? \_\_\_\_\_

Will the restaurant order food for you? \_\_\_\_\_ If NO, where will you purchase food? \_\_\_\_\_

A copy of your menu must be attached to this application.

Draw the layout of your unit on the back of this page.

Serial number of mobile food unit \_\_\_\_\_

Size of potable water storage tank \_\_\_\_\_

Size of water heater \_\_\_\_\_

Size of waste water holding tank \_\_\_\_\_

Please list the name and address of the home base for the mobile food unit or pushcart.  
*Both pushcarts and mobile food units must operate in conjunction with the permitted restaurant.*

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

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

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*This form must be returned along with the application for a Pushcart/Mobile food unit to the office servicing your event:*

*Iredell County Health Center, Environmental Health Division*

\_\_\_ 318 Turnersburg Hwy., Statesville, NC 28625-2798 Phone 704-878-5305 Fax 704-871-3483

\_\_\_ 610 East Center Ave., Mooresville, NC 28115-2598 Phone 704-664-5281 opt.3 Fax 704-662-3239

**AGREEMENT WITH A PERMITTED RESTAURANT OR FOODSTAND TO ALLOW A PUSH CART/MOBILE FOOD UNIT TO OPERATE IN CONJUNCTION WITH THE ESTABLISHMENT**

Name and address of the restaurant/food stand that is giving permission for the pushcart /mobile food unit to operate from their facility:

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Title 15A NCAC (North Carolina Administrative Code) 18A .2600 "Sanitation of Restaurants and Other Food handling Establishments" specifies in Section .2638 "General Requirements For Pushcarts and Mobile Food Units" that:

***"(f) [Pushcarts and mobile food units] shall operate in conjunction with a permitted restaurant and shall report at least daily to the restaurant for supplies, cleaning and servicing."***

Permission is given to \_\_\_\_\_ to operate a pushcart/mobile food unit in conjunction with my facility. I understand the applicable regulations require that the unit report daily to my establishment for supplies, cleaning, and servicing (including replenishing of any on-board water supply and disposal of all solid and liquid wastes). I agree to allow all supplies for the unit to be stored on my premises and understand that the State rules do not permit supplies for such facilities to be stored in any private residence. I understand that any sanitation deficiencies resulting at my restaurant, even if directly or indirectly related to the operation of the pushcart/mobile food unit, will be reflected in the sanitation grade of my restaurant. This agreement shall stay in effect as long as I am the restaurant owner/operator, unless rescinded by notifying the pushcart/mobile food unit owner and the Environmental Health Section of the Iredell County Health Center in writing should this approval be rescinded.

***I, the restaurant/foodstand operator, can and will provide the necessary facilities for the above-mentioned pushcart or mobile food unit at my permitted facility as checked below:***

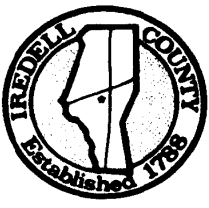
Please note that everything in **bold and underlined** must be checked.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Preparation of food                                 | <input type="checkbox"/> <b><u>Utensil Wash/can wash</u></b> | <input type="checkbox"/> <b><u>Store refrigerated/frozen food</u></b> |
| <input type="checkbox"/> Electrical hook-up                                  | <input type="checkbox"/> <b><u>Store Dry Food</u></b>        | <input type="checkbox"/> <b><u>Store Supplies</u></b>                 |
| <input type="checkbox"/> <b><u>Toilet &amp; handwashing</u></b>              | <input type="checkbox"/> Overnight parking                   | <input type="checkbox"/> Supply food products                         |
| <input type="checkbox"/> <b><u>Waste tank sewage disposal facilities</u></b> |  |   |

Will the client have access to the building when there is no restaurant staff on site? \_\_\_\_ YES \_\_\_\_ NO

\_\_\_\_\_  
Signature of Restaurant/Foodstand Owner

\_\_\_\_\_  
Date



Phone Number

## IREDELL COUNTY HEALTH DEPARTMENT

### *Environmental Health Division*

318 Turnersburg Highway • Statesville, North Carolina 28625-2798 • 704-878-5305  
610 E. Center Avenue • Mooresville, North Carolina 28115-2548 • 704-664-5281 Opt. 3

Donna M. Campbell, RN, MPH  
Health Director

### ***MINIMUM REQUIREMENTS FOR MOBILE FOOD UNITS***

- Must operate in conjunction with a permitted restaurant
- At least a single-vat sink with integral drainboards on each end.
- Separate handwash sink
- Hot and cold running water
- Waste water tank sized 15% larger than total water storage capacity
- Commercial NSF freezer
- Commercial NSF refrigeration
- Approved materials for floors, walls and ceilings that are easily cleanable
- Adequate counter top space for food preparation
- Approval from local Fire Marshall
- Must report daily back to restaurant for servicing
- Water hose must be approved food-grade