



Benton County Health Department

Environmental Health

4077 SW Research Way

P.O. Box 3020

Corvallis, OR 97339-3020

Main Line: 541-766-6841 • FAX: 541-766-6248

Health Department: 530 NW 27th Street, Corvallis OR 97333 • 541-766-6835

Developmental Disabilities: 541-766-6847

Telecommunications Relay Service: TTY 1-800-735-2900 • Website: www.co.benton.or.us/health

Person-Centered Behavioral & Physical Health Care Public Health & Prevention Regulatory and Population Health Health Management Services

PLAN REVIEW PROCEDURE

Dear Applicant:

The Plan Review process is done for any type of mobile food service, from brand new mobile units to units that are remodeled, or have a menu change. It is done to ensure compliance with the Oregon Mobile Food Unit Rules along with food safety.

The Plan Review process is applied through the Benton County Environmental Health office and the process begins *prior* to construction. There are three parts to the procedure:

1. Submit the application and fee (see attached fee sheet). A license is required in order to serve food or drinks to the public. (*Mobile Units that are already licensed do not need to do this.*) Fill in all requested information, this will speed up the process. *Incomplete applications will not be reviewed.* Once our office has reviewed the application and plans, an approval letter will be sent or a letter requesting additional information that will require a response.
2. Mobile Units are required to operate from a licensed restaurant, commissary or warehouse; additional plan review and/or fees may apply.
3. Submit the pre-opening inspection application, fee and set-up the pre-opening inspection.

The Oregon Mobile Unit Rules can be accessed at:

http://arcweb.sos.state.or.us/pages/rules/oars_300/oar_333/333_162.html

<http://public.health.oregon.gov/HealthyEnvironments/FoodSafety/Documents/foodsantiationrulesweb.pdf>

Please call our office at 541-766-6841 if you have any additional questions or need clarification.



Benton County Health Department Environmental Health

4077 SW Research Way
P.O. Box 3020
Corvallis, OR 97339-3020

Main Line: 541-766-6841 • FAX: 541-766-6248

Health Department: 530 NW 27th Street, Corvallis OR 97333 • 541-766-6835

Developmental Disabilities: 541-766-6847

Telecommunications Relay Service: TTY 1-800-735-2900 • Website: www.co.benton.or.us/health

Person-Centered Behavioral & Physical Health Care Public Health & Prevention Regulatory and Population Health Health Management Services

PRE-OPENING OPERATIONS CHECKLIST FOR RESTAURANTS

1. Apply for license and pay fee at least one week prior to pre-opening inspection.
2. At time of pre-opening inspection, the following must be met:
 - All major construction must be completed
 - Refrigeration units must be 41°F or cooler and contain thermometers
 - Hot holding units must be operational
 - Dishwashing machines must be working properly
 - Sign-offs must be available from the fire marshal, plumbing, mechanical and electrical inspectors
 - Building must be fly- and rodent-proofed
3. The pre-opening inspection is best done one week prior to opening the restaurant so that time is available to make corrections if necessary.
4. No perishable food is to be on the premises unless refrigeration is operational and all major construction is completed.
5. Provide hot water soap and sanitary towels at each hand-washing sink.
6. Once code provisions are met, a license can be issued.
7. Benton County Code Chapter 22 requires food service workers to obtain a food worker's permit within five days of their employment. Owners or operators are required to inform all affected workers of this requirement. Call 541-766-6041 for class information.
8. Numerically scaled, spirit-stem thermometers, accurate to + or -3°F are to be provided for each refrigeration unit used to store potentially hazardous food.
9. Metal stem-type numerically scaled indicating thermometer, accurate to + or -2°F must be provided for checking food temperatures (scale 32°F to 220°F range or greater).
10. A chemical test kit or test strips must be provided in order to measure sanitizer concentrations for three-compartment sink and chemical sanitizing machines.
11. Post dining area in accordance with the Oregon Clean Air Act (OAR Chapter 333, Division 15).
12. Employees must keep their hair effectively restrained, i.e. braids, buns, or caps, use of hairnets, or shorter hair with hair spray.
13. Toilet rooms used by women shall have at least one covered waste receptacle.

“Healthy People in a Healthy Community”



**Benton County Health Department
Environmental Health Division**

4077 SW Research Way
P.O. Box 3020
Corvallis, OR 97339-3020

Main Line: 541-766-6841 • FAX: 541-766-6142

Health Department: 530 NW 27th Street, Corvallis OR 97333 • 541-766-6835

Developmental Disabilities: 541-766-6847

Telecommunications Relay Service: TTY 1-800-735-2900 • Website: www.co.benton.or.us/health

Person-Centered Behavioral & Physical Health Care Public Health & Prevention Regulatory and Population Health Health Management Services

FOOD SERVICE PRE-OPENING INSPECTION REPORT

Business Name: _____

Business Phone: _____

Site Address: _____

Please specify which address to use for mailing your license: Business Address Owner Address

Owner's Name: _____

Phone: _____

Address: _____

Cell: _____

Contact Person: _____

Phone: _____

Email: _____

Cell: _____

Proposed date for inspection: _____

Proposed opening date: _____

Signature: _____

Date: _____

Please make checks payable to: **Benton County Health Department
Environmental Health Division
PO Box 3020
Corvallis, OR 97339-3020**

Fees: Restaurant or other food service please refer to current fee sheet (enclosed)

Questions: 541-766-6841

For Office Use Only

Fee Received: _____ Receipt # _____ Date: _____ Paid By: _____

Method of Payment: Check # _____ Cash _____ Visa/MasterCard _____



MOBILE FOOD UNIT PLAN REVIEW PACKET

This packet is intended to help you through the plan review process and to assure that your mobile food unit meets the rule requirements. This document is a companion to the Food Sanitation Rules and must be completed as part of the plan review process.

This packet consists of the following information:

- **Applicants Checklist for Mobile Food Units**
- **Mobile Food Unit Plan Review Application**
- **General Information**
- **Mobile Food Unit General Requirements and Limitations**
- **Mobile Food Unit Plan Review Worksheet**
- **Mobile Food Unit Operating Schedule**
- **Mobile Food Unit Operational Guide**

Please complete the attached documents and submit them with the required plan review fee to the local environmental health department. **Approval from the local environmental health department must be obtained prior to construction or operation of your unit.** The following materials must also be submitted with your completed packet:

1. Complete plans of the unit drawn to scale, including equipment location.
2. List of all equipment necessary for the operation of the unit.
3. A description of the construction materials used on the unit, including surface finishes for floors, walls, ceilings and countertops.
4. Information relating to your base of operation, including times and dates of use.
5. A list of your operating location(s) and approximate time schedule. If the unit operates on a designated route, you must specify your itinerary. Attach a completed **Mobile Food Unit Operating Schedule**.

APPLICANT'S CHECKLIST FOR MOBILE FOOD UNITS

This checklist is intended to help you track your progress through the plan review process. When all steps are completed, your mobile food unit should be ready for licensure and operation.

- Submit plan review application and review packet, plans, and required fee. Obtain plan review approval **prior** to beginning construction.
- Receive plan review approval from the local environmental health department.
- Obtain any required approvals from other agencies, such as zoning/planning, building, fire marshal, or city or county authorities.
- Contact the local environmental health department at least two weeks prior to opening to schedule a preoperational inspection.
- Submit a **Mobile Food Unit License Application** with the required fee.
- Submit a **Mobile Food Unit Operating Schedule**, if applicable



**MOBILE FOOD UNIT
PLAN REVIEW APPLICATION**

Business name: _____

Business address: _____

Owner name: _____

Individual Corporation Partnership Other _____

Owner mailing address: _____

Owner phone #: _____ Establishment phone #: _____

New construction Remodel Completion date: _____

Previously licensed? Yes No Former name: _____

Mobile Food Unit Class I II III IV

Operating without a base of operation? Yes No

OAR 333-162-0920 requires that a completed plan review packet be submitted and reviewed before your unit can be issued a license and approved to operate. Incomplete plans may be returned for additional information.

**The payment of \$_____ mobile food unit plan review fee enclosed.
Make checks payable to:**

I agree to comply with the provisions of Oregon Revised Statutes, Chapter 624, and the Administrative Rules, Chapter 333, of the Oregon Department of Human Services.

Signed: _____ Date: _____

Please call your local county environmental health office if you have questions about your license, fees, facility inspections or how to obtain a food handler certificate.

FOR OFFICE USE ONLY

Fee received: _____ Date: _____

Reviewed by: _____ Date: _____

Approved Not Approved

Comments: _____

If you need this form in an alternate format call: (971) 673-0185.

GENERAL INFORMATION

A mobile food unit is defined in OAR 333-150-0000, 1-201.10 as "*...any vehicle that is self-propelled or that can be pulled or pushed down a sidewalk, street, highway or waterway, on which food is prepared, processed or converted or which is used in selling and dispensing food to the ultimate consumer.*" There is no size limit to mobile food units, except they must meet the following basic requirements:

- Mobile food units must be mobile and on wheels (excluding boats) at all times during operation.
- The unit and all operations and equipment must be integral to the unit. This does not preclude the use of a barbecue unit with a Class IV unit.

There are four types of mobile food units. The mobile food unit classifications are based upon the type of menu served.

CLASS I - These units can serve only intact, packaged foods and non-potentially hazardous drinks. No preparation or assembly of foods or beverages may take place on the unit. Non-potentially hazardous beverages must be provided from covered urns or dispenser heads only. No dispensed ice is allowed.

CLASS II - These units may dispense unpackaged foods. However, no cooking, preparation or assembly of foods is allowed on the unit. No self-service by customers is allowed.

CLASS III - These units may cook, prepare and assemble food items. However, cooking of raw animal foods on the unit is not allowed.

CLASS IV - These units may serve a full menu.

IMPORTANT ADDITIONAL MOBILE FOOD UNIT INFORMATION

- Because the mobile food unit design is related to the menu served, the local environmental health department must approve any change in the menu. Failure to obtain approval for a menu change may result in closure of your unit.
- A mobile food unit may connect to water and sewer if it is available at the operating location; however, the tanks must remain on the unit at all times.
- A mobile food unit may not serve as a commissary for another mobile food unit or as the base of operation for a caterer.
- Food handler cards are required for all persons working in a mobile food unit or at a base of operation. Contact the local environmental health department for information on obtaining a food handler card.
- Auxiliary storage shall be limited to items necessary for that day's operation. No self-service, assembly or preparation activities may occur from auxiliary storage containers.
- Handling of unpackaged foods, dishwashing and ice making are prohibited in a warehouse.
- Finally, while this document contains some detailed information about the rules for the construction and operation of mobile food units, it does not contain all the requirements for your unit. Please refer to the Food Sanitation Rules at www.healthoregon.org/foodsafety.

MOBILE FOOD UNIT GENERAL REQUIREMENTS AND LIMITATIONS

A mobile unit can serve menu items within its classification number or below. For example, a Class III unit may also sell items allowed under Class II and I. Please see Food Sanitation Rules for full requirements.

	Class I	Class II	Class III	Class IV
Water Supply Required	No	Yes	Yes	Yes
Handwashing System Required	No	Yes - Minimum Five Gallons ¹	Yes - Minimum Five Gallons ¹	Yes - Minimum Five Gallons ¹
Dishwashing Sinks Required	No	No ²	No ²	Yes - Minimum 30 Gallons
Assembly or Preparation Allowed	No	No	Yes	Yes
Cooking Allowed	No	No	Yes ³	Yes
Barbecue Operation Allowed	No	No	Yes - Reheating of Fully Cooked Foods ⁴	Yes
Restroom Required	Yes	Yes	Yes	Yes
Examples	Prepackaged Sandwiches/ Dispensed Soda	Service of Unpackaged Food Items	Bento (with precooked meat), Espresso, Hot Dogs	No Menu Limitations

¹ The handwashing system must be plumbed to provide hot and cold running water.

² Must provide a minimum of 30 gallons of water for dishwashing or twice the capacity of the three compartment sinks, if provided.

³ May cook only foods that are not potentially hazardous when raw (rice, onions, pasta, etc.).

⁴ With Class III units, the barbecue must be integral to the unit and only used to impart flavor.

5. How will hot and cold food temperatures be maintained on the unit (3-501.16)?

6. Where is the commissary or warehouse located? List the approximate time and days of the week you will be using your commissary or warehouse (OAR 333-162-0930 & 333-162-0940).

7. What is the source of drinking water for use on the unit? Describe how water will be transported to the unit and how the water system is constructed. What is the size of the fresh water storage tank (Chapters 5-1, 5-2, 5-3)?

8. How will wastewater be removed from the unit? Describe how wastewater will be transported from the unit to the approved wastewater disposal location. What is the size of the wastewater storage tank (Chapter 5-4)? (The volume of the waste tank must be 10 to 15 percent greater than the volume of the potable water storage tank.)

9. What is the power source for the mobile food unit? Describe how foods will be transported to and from the unit and how hot and/or cold holding temperatures will be maintained during transit (3-501.16).

10. What type of handwashing system will be used on the unit (5-203.11 & 6-301)? (A minimum of five gallons must be provided for handwashing and classes II, III and IV of mobile units must have plumbed hot and cold water for handwashing).

11. Describe how dishes and utensils will be washed. If dishes and utensils are washed on the unit, a minimum of 30 gallons of water or twice the capacity of the three compartment sink, whichever is greater, must be provided for this purpose (Chapter 4).

12. Describe how garbage will be stored and where it will be thrown away. What methods of insect and rodent control will be used in your unit (screens, garbage cans with tight fitting lids) (6-202.15, 6-501.111)?

13. Where is your restroom facility located (6-302, 6-402.11 & OAR 333-162-0020(4))?

14. Describe the type of overhead protection provided for your unit (ceilings, awnings, umbrellas) (OAR 333-162-0680).

15. Where and how will the unit be cleaned? If you plan to wet mop the unit, where will you dispose of mop water (5-203.13 & OAR 333-162-0930)?

MOBILE FOOD UNIT OPERATING SCHEDULE

- I plan on operating at one location.

Location address: _____

- I plan on operating at multiple locations or on a route.

List all locations where you plan to operate. If operating on a fixed route or in multiple locations, indicate the approximate time and days of the week or date you will be at each location. Attach additional sheets if necessary.

Operating Location	Time	Day of Week or Specific Date

You are required by law to notify your local public health authority if you're operating location or route changes. If you relocate to another county you must first notify the new county prior to operation.