

B. VEHICLE INFORMATION

13. Do you own the food vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No		14. If not, who is the registered owner?	
Are you an employee of the registered vehicle owner? <input type="checkbox"/> Yes <input type="checkbox"/> No		15. If not, are you renting this vehicle from the owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
16. Do you have a written agreement to lease it? <input type="checkbox"/> Yes <input type="checkbox"/> No		17. How long have you owned it or leased it?	
18. Has it been permitted in Fresno County before? <input type="checkbox"/> Yes <input type="checkbox"/> No		19. Do you have a driver's license? <input type="checkbox"/> Yes, expiration date: _____ <input type="checkbox"/> No	
20. What year was your vehicle built?	21. What is the make and model of the vehicle?	22. Do you have DMV registration for this vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No	
23. What is the license plate of the vehicle?		24. What is the VIN # of the vehicle?	
25. This vehicle is a: <input type="checkbox"/> prefabricated food truck, <input type="checkbox"/> trailer, <input type="checkbox"/> other:			
26. Did you build the vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No	27. Has it been inspected by the California Dept. of Housing and Community Development? <input type="checkbox"/> Yes <input type="checkbox"/> No		
28. Does it have an insignia from the HCD? <input type="checkbox"/> Yes <input type="checkbox"/> No		29. What is the insignia number?	

It would be helpful to include a couple pictures of the vehicle with this operational statement.

C. EQUIPMENT INFORMATION

30. How are the following equipment in the vehicle powered?	
a. Water heater:	<input type="checkbox"/> gas, <input type="checkbox"/> propane, <input type="checkbox"/> generator, <input type="checkbox"/> inverter, <input type="checkbox"/> other:
b. Refrigerator:	<input type="checkbox"/> gas, <input type="checkbox"/> propane, <input type="checkbox"/> generator, <input type="checkbox"/> inverter, <input type="checkbox"/> other:
c. Steam Table:	<input type="checkbox"/> gas, <input type="checkbox"/> propane, <input type="checkbox"/> generator, <input type="checkbox"/> inverter, <input type="checkbox"/> other:
31. If you have a generator, where on the vehicle is it mounted?	32. How is the power cord installed?
33. Does your vehicle have shore power (can it plug into an outlet to power all electrical systems)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

33a. What equipment will you have at the preparation facility? (Put a number indicating how many units that you will have at the facility by each type of equipment; examples: 2 BBQ, 4 Hand wash sinks, 1 Mixer)

- | | |
|---|--|
| <input type="checkbox"/> Stove, range, burners | <input type="checkbox"/> Blender |
| <input type="checkbox"/> Griddle (solid flat surface) | <input type="checkbox"/> Hand wash sink |
| <input type="checkbox"/> BBQ | <input type="checkbox"/> Mop sink |
| <input type="checkbox"/> Deep fryer | <input type="checkbox"/> Food preparation sink |
| <input type="checkbox"/> Wok | <input type="checkbox"/> 3-compartment sink with drainboards |
| <input type="checkbox"/> Oven | <input type="checkbox"/> Commercial dish washing machine |
| <input type="checkbox"/> Steam tables | <input type="checkbox"/> Sandwich preparation refrigerator |
| <input type="checkbox"/> Microwave | <input type="checkbox"/> Upright full-height refrigerator – Metal doors |
| <input type="checkbox"/> Heat lamps | <input type="checkbox"/> Upright full-height refrigerator – glass doors* |
| <input type="checkbox"/> Preparation tables | <input type="checkbox"/> Walk-in refrigerator |
| <input type="checkbox"/> Separate storage area | <input type="checkbox"/> Upright full-height freezer |
| <input type="checkbox"/> Mixer | <input type="checkbox"/> Walk-in freezer |

List other types of equipment:

34. What make and model is the:

a. Refrigerator:

b. Generator:

c. Freezer:

d. Inverter/batteries:

e. Water Heater:

35. If refrigerator is not a prefabricated commercial refrigerator, what make and model are the:

a. Compressor:

b. Heat Exchanger:

c. Thermostat:

36. Does the food vehicle have a hand-wash sink?

Yes No

37. Does it have a three-compartment sink?

Yes No

* Read the data label on the inside of the glass door refrigerator (usually on the inside left wall). They will state that they are for prepackaged bottled beverages. They typically do not recover fast enough to keep temperatures cold enough for potentially hazardous foods like meat, fish, or poultry during heavy use. This type of refrigerator will not be approved for storing potentially hazardous foods.

38. Do you have a probe-style thermometer? <input type="checkbox"/> Yes <input type="checkbox"/> No	39. What size in gallons is your hot water tank?
40. What size in gallons is your clean water tank?	41. What size in gallons is your waste water tank?
42. Where do you fill and empty your tanks?	43. Do you have a clean water hose to fill your tank with?
44. How is your clean water hose marked to make sure you don't use it for dirty water?	45. What temperature does your hot water have to be?
46. Does your hand-wash sink have soap in a dispenser? <input type="checkbox"/> Yes <input type="checkbox"/> No	47. Does your hand-wash sink have paper towels in a dispenser? <input type="checkbox"/> Yes <input type="checkbox"/> No
48. What equipment does your vehicle have? Check all that apply. List equipment not listed. <input type="checkbox"/> Stove, range, burners <input type="checkbox"/> Griddle <input type="checkbox"/> Barbecue grill <input type="checkbox"/> Mechanical refrigerator <input type="checkbox"/> Steam table <input type="checkbox"/> Deep fryer <input type="checkbox"/> Handwash sink <input type="checkbox"/> Three compartment sink <input type="checkbox"/> Other:	
49. Do you have mechanical exhaust ventilation (a hood) over all cooking equipment such as grills, fryers, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
50. Do your hood fans work?	51. Does your hood have an ansul?
52. If so, when was the last time it was serviced?	53. How often do you service it?
54. Do you have a first aid kit?	55. Do you have a Fire extinguisher rated 10 BC?
56. When was the last time it was serviced?	57. How often do you service it?
58. Are all of the surfaces in the vehicle smooth and easy to clean? (No raw wood or uneven edges)	
59. Are all the gaps or spaces around pipes, conduits or hoses sealed and smooth?	
60. Do all windows and doors have screens or closable partitions to prevent entrance of vermin?	

COMMISSARY

61. Does your commissary have adequate space for you to store your food and utensils?

62. If not, where will you store it?															
63. Does your commissary have adequate hand-washing facilities?															
64. Does your commissary have utensil washing equipment?															
65. What do you plan on doing at the commissary? (Check all that apply)															
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Cooking</td> <td style="width: 33%; border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Cooling</td> <td style="width: 33%; padding: 5px;"><input type="checkbox"/> Baking</td> </tr> <tr> <td style="border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Washing utensils</td> <td style="border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Marinating</td> <td style="padding: 5px;"><input type="checkbox"/> BBQing</td> </tr> <tr> <td style="border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Storing supplies</td> <td style="border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Packaging/Labeling</td> <td style="padding: 5px;"><input type="checkbox"/> Mixing/blending</td> </tr> <tr> <td style="border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Reheating</td> <td style="border-right: 1px dashed black; padding: 5px;"><input type="checkbox"/> Storing utensils</td> <td style="padding: 5px;"><input type="checkbox"/> Thawing</td> </tr> <tr> <td colspan="3" style="padding: 5px;"><input type="checkbox"/> Other:</td> </tr> </table>	<input type="checkbox"/> Cooking	<input type="checkbox"/> Cooling	<input type="checkbox"/> Baking	<input type="checkbox"/> Washing utensils	<input type="checkbox"/> Marinating	<input type="checkbox"/> BBQing	<input type="checkbox"/> Storing supplies	<input type="checkbox"/> Packaging/Labeling	<input type="checkbox"/> Mixing/blending	<input type="checkbox"/> Reheating	<input type="checkbox"/> Storing utensils	<input type="checkbox"/> Thawing	<input type="checkbox"/> Other:		
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<input type="checkbox"/> Other:															
66. Do you understand that you must take your vehicle to be serviced at the Commissary at least every day that you use it?															

OPERATIONS

67. What kinds of food and drinks do you plan to sell? Give a complete menu.	
68. How many employees do you intend to have?	69. How often do you intend to prepare food?
70. List all facilities, places, and/or vehicles where food will be prepared and stored?	
71. Which foods will be prepared at the commissary in addition to on the vehicle?	
72. Which foods will be prepared on the vehicle?	
73. Where do you obtain your products?	

a. Meat:

b. Seafood:

c. Poultry:

d. Vegetables/Fruits:

e. Dry Ingredients:

f. Beverages:

g. Ice:

74. How are these foods transported to your truck (Do you pick them up or are they delivered?)

75. What days of the week do you intend to operate?

Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

76. What hours per day do you intend to operate? (*example: from 6:00 am to 1:00 pm, then from 4:00 pm to 10:00 pm*)

77. Where do you plan on operating? Give a list of location(s). Use a separate sheet of paper if needed.

78. Do you serve rice and beans?

79. Do you soak the beans?

80. If you do NOT soak or cook the beans, where do you get the beans?	
81. Where do you soak the beans?	
82. How long (in hours) do you soak the beans?	
83. How to you cook the beans?	
84. What equipment do you use to cook the beans?	
85. Where do you cook the beans?	
86. How do you cook the rice?	
87. Where do you cook the rice?	
88. What equipment do you use to cook the rice?	
89. Do you have the proper land use entitlements to operate at the above locations? <i>(Check with the proper zoning offices listed at the end of this document. Provide documentation of land use entitlements.)</i>	
90. What time of day are you planning on being at your Commissary?	
91. How are hot food temperatures going to be maintained during your operating hours?	
92. How are hot food temperatures going to be maintained during transport when you are driving between sites and your commissary?	
93. How are cold potentially hazardous food (meat, dairy, poultry, fish, cut melons, etc.) temperatures going to be maintained during your operating hours?	
94. How are cold food temperatures going to be maintained during transport when you are driving between sites and your commissary?	
95. What is the minimum temperature for hot foods?	96. What is the maximum temperature for cold foods?

97. What kind of sanitizer will you use?	98. How strong does it need to be?
99. How do you check your sanitizer strength?	100. Do you or an employee have food safety certification?
101. Who is the person that has food safety certification?	102. From what company?
103. When did they take the exam?	
104. Do you have a plan in place for educating the other employees/food handlers?	
105. How long is the drive from the commissary to the area where you intend to operate?	
106. How will you check your food temperatures?	107. What do you do with leftovers?
108. Do you understand that you cannot prepare food at your home?	
109. Do you understand that during operations, all food needs to be held, stored, displayed, and served only from the vehicle (You cannot set up a table or a cooking unit outside of the vehicle)?	
110. Do you understand that you cannot park your vehicle in any location except the commissary for longer than one hour unless you have special permits from the City, County, and/or Zoning Department?	
111. Do you understand that you cannot build onto your vehicle, install tables, chairs, awnings, portable toilets, electrical service, etc., unless you have permission to have a permanent location from the City, County, and/or Zoning Department?	
112. What should you do if you lose power to the refrigerator?	
113. What will you do if you have no hot water?	
<p>Notes/Comments:</p> <hr/> <hr/> <hr/> <hr/> <hr/>	

The above is an accurate description of how we will operate our business. If there are changes to the above, then we will notify the Fresno County Department of Public Health, Environmental Health Division in writing at 1221 Fulton Mall, Third Floor, Fresno, CA or P.O. Box 11867, Fresno, CA 93775.

Sign here: _____

Date: _____

Print name: _____

Title: _____

BUILDING INSPECTION DEPARTMENTS FOR INCORPORATED CITIES AND
FRESNO COUNTY TO INQUIRE ABOUT PROPER LAND USE ENTITLEMENTS

Fresno County Department of Public Works and Planning

Development Services Division
2220 Tulare St. (Fresno County Plaza) Suite A
Fresno CA 93721
Phone: 262-4029

City of CLOVIS, City Hall

Building Division
1033 Fifth St.
Clovis CA 93612
Phone: 324-2390

City of COALINGA, City Hall

Building Department
155 W. Durian
Coalinga CA 93210
Phone: 935-1534

City of FIREBAUGH, City Hall

Building Department
1575 Eleventh St.
Firebaugh CA 93622
Phone: 659-2043

City of FOWLER, City Hall

Building Department
128 S. Fifth St.
Fowler CA 93625
Phone: 834-3113

City of FRESNO, City Hall

Building & Safety Division
2600 Fresno St.
Fresno CA 93721
Main Phone: 621-8200
Inspections Phone: 621-8104

City of HURON, City Hall

Building Department
36311 Lassen Ave.
P.O. Box 339 (MAILING ADDRESS)
Huron CA 93234-0339
Phone: 945-2241

City of KERMAN, City Hall

Building Department
850 S. Madera Ave.
Kerman CA 93630
Phone: 846-9384

City of KINGSBURG, City Hall

Building Department
1401 Draper St.
Kingsburg CA 93631
Phone: 897-5328

City of MENDOTA, City Hall

Building Department
643 Quince
Mendota CA 93640
Phone: 655-4298

City of ORANGE COVE, City Hall

Building Department
633 Sixth St.
Orange Cove CA 93646
Phone: 626-4488

City of PARLIER, City Hall

Building Department
1100 E. Parlier Ave.
Parlier CA 93648
Phone: 646-3545

City of REEDLEY, City Hall

Building Department
1733 Ninth St.
Reedley CA 93654
Phone: 637-4200 Ext. 225

City of SANGER, City Hall

Building Department
1700 Seventh St.
Sanger CA 93657
Phone: 875-7515

City of SAN JOAQUIN, City Hall

Building Department
21900 Colorado St.
P.O. Box 758 (MAILING ADDRESS)
San Joaquin CA 93660-0758
Phone: 693-4311

City of SELMA, City Hall

Building Department
1710 Tucker
Selma CA 93662
Phone: 896-2610

To obtain insignias for occupied vehicles (vehicles that can be boarded) contact:

You do not need to go to this office. They have local inspectors.

**State of California Department of Housing and Community Development
Division of Codes and Standards**

Northern Area Office

9342 Tech Center Drive #550
Sacramento, CA 95826
Phone: 916-255-2501

