PO BOX 461 / Bonham, TX 75418 / Tel 903-819-0211 / healthinspector4FC@proton.me
Serving Bonham, Honey Grove, Leonard, Ravenna, Trenton, Telephone and the unicorportated areas of Fannin County

CHECKLIST FOR OPENING FOOD ESTABLISHMENTS

INSTRUCTIONS: (1) Select the appropriate check list box below (2) Follow the steps 3) Submit required fees

| □ BUILD NEW ESTABLISHMENT | Required Fees | | | |
|---|---|--|--|--|
| Complete the Plan Review Application. Prepare a blueprint, sketch, or floor plan of the establishment, including equipment, coolers, sinks, cookers, warewash area, restrooms, storage, exterior equipment, dumpster etc. Submit the application, the plan review fee, and the blueprints to the above address. An on-site inspection may be necessary at this time. Check local City Hall requirements for zoning, building, fire, or Certificate of Occupancy. The plans will be reviewed. All comments, alterations, or corrections are returned to the owner. All requirements in the current Texas Food Establishment Rules and local ordinances apply. Any variance requested by owner shall be submitted with the application. Ensure that all food employees have a permit card. (Fand Manager/Fand Handler.) Complete the Fand Manager Permit Registration Application (Note:certificates shall be registered for Fannin County). When construction is complete, call for a pre-operational inspection for final approval. Complete the Retail Food Establishment Permit Application and pay the appropriate annual fee. Begin operations. (The annual operating permit is emailed. Post the permit for public display.) | \$125 (Checks payable to: Amanda Brogdon) Mail forms and fee to address above or request online link for payment. Check local City Hall for their fees Food Manager Course-up to14 hr (accredited course fees vary) Food Manager Registration (\$25) Food Handler (online price varies) (72 hours notice) Annual Fee (\$200 to \$300) | | | |
| ☐ REMODEL EXISTING ESTABLISHMENT | | | | |
| Notify Health Inspector. Some or all of the steps listed above may be required depending on the extent of the remodeling. | | | | |
| ☐ CHANGE OF OWNERSHIP | Required Fees | | | |
| Notify Environmental Health Division. Inspection reports of the previous establishment will be reviewed for previous structural or equipment defects. Correction may be required if warranted. If warranted, new owner shall follow the steps in the Build New Establishment box above. If not warranted, for example only minor corrections, the plan review and fee are both waived. Ensure that all food employees have a permit card. (See Infarmation Fact Sheet: Fand Manager/Fand Handler Permits). Complete the Fand Manager Permit Registration Application. (Note: some (accredited course fees vary) courses prepay this fee for the students) Complete the Retail Fand Establishment Permit Application and pay the appropriate annual fee. Begin operations. (The annual operating permit is mailed. Post the permit for public display | Plan Review (\$125 unless waived) Food Manager Course up to 14 hr Food Manager Registration (\$25) Food Handler (online price varies) Annual Fee (\$200 to \$300) | | | |

Enclosures:

(I) Checklist for Food Establishment

(2) Info Fact Sheet: Manager/Handler

(3) Food Manager Registration

(4) Retail Food Establishment Permit Application

(5) Plan Review Application,

(6) Plan Review-4 pages

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INFORMATION FACT SHEET: FOOD MANAGER and FOOD HANDLER PERMITS

REQUIREMENTS

- 1. Permit Cards:
 - All employees must have permit cards PRIOR to starting work. No grace periods.
 - · Permit cards shall be current.
 - Original permit cards shall be available during inspections.
 - Penalty: Citation issued for noncompliance.
- 2. Food Manager: All food establishments preparing or serving potentially hazardous food shall have at least one certified food service manager on duty during each shift. The manager shall have successfully completed a food service manager course (see <u>Classes</u> below). All online courses must provide a copy of the course certificate to the Health Inspector with a registration fee of \$25 (a Fannin County permit card will be issued as verification of registration). The managers are not required to have a food handler permit.
- 3. <u>Food Handler:</u> All food handlers (chefs, cooks, butchers, waitresses, waiters, bakers, bar persons, bus persons, dishwashers, delivery drivers, persons handling ice or any other type of open food or beverage, etc.) shall have a food handler permit. Children under 14 years of age are not allowed in food preparation. All current federal child labor laws are applicable.
- 4. <u>Temporary Events:</u> All workers shall have a permit (see table below). Valid food handler permits obtained from a DSHS accredited course will be accepted.
- Take any time at a computer with internet access. Permit may be printed after successful completion of curriculum and test.

* FOODMANAGERS ON-LINE:

Take any time at a computer with internet access. Permit may be printed after successful completion of curriculum and test.

* FOODHANDLERS ON-LINE:

Take any time at a computer with internet access. Permit may be printed after successful completion of curriculum and test.

| PERMIT TYPE | COURSE LOCATION | TELEPHONE | DAY | TIME | COST | EXPIRATION |
|---------------------|--|-------------------------------------|--------------|--------------|------------------------|--------------|
| Food Manager | Texoma Food Service Training (classroom) Must be registered with Fannin County. Other locations/On-line (if State approved) | 903-815-1286 512-458-7111 | Call Call | Call Call | call varies | 5 yr Call |
| Food Handler | *On line class info above | online | anytime | anytime | varies | 2уг |
| Temporary Events | Option 1: One food manager permit Option 2: Food handler card for all workers | email: healthinspector4FC@proton.me | | \$35 | 14 days consecutive | |

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FOOD MANAGER PERMIT REGISTRATION APPLICATION

INSTRUCTIONS: (1) Complete all information below (2) Enclose a copy of the food service manager certificate or card (3) **Submit forms & \$25.00 fee to Health Inspector by mail or request online link.**

| | food service manager training course that is accigister my certificate with Fanninn County Health I | | |
|---------------------------|---|--------------|-------------|
| FOOD MANAGER | | | |
| Name: | | | |
| (Last) | (First) | | (M) |
| Home Address: | | | |
| | | _ | |
| City: | State: | Zip: | |
| Telephone: | Driver License No: | Date of B | irth: |
| Signature: | | | |
| ESTABLISHMENT | | | |
| | | | |
| ivallie. | | | |
| Address: | | | |
| City: | State: Zip | : Tele | phone: |
| GENERAL MANAGER: _ | FA | X OR E-MAIL: | |
| ACCREDITED FOOD SERVICE M | ANAGER TRAINING COURSE | | |
| | | | |
| Name: | | | |
| Certificate No: | Expiration Date: | | |
| | | | |
| | HEALTH INSPECTOR USE ONLY | | |
| | | | |
| RECEIPT NO: | | | |
| DATE PAID: | | | |
| REGISTRATION FEE: \$25 | FC CERTIFICATE NO.: | | |
| INITIALS: | MANAGER PERMIT MAILED / DELIVERED: | | |

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RETAIL FOOD ESTABLISHMENT PERMIT APPLICATION

INSTRUCTIONS: 1. Complete <u>all information</u> include \$50 late fee for delinquent applications) 2. Obtain employee permits* Provide a <u>copy</u> of all <u>Manager</u> & Handler <u>permit</u> cards and work roster. 3. Pay Fee by mail or request an online link.

| ESTABLISHIVIENT Renewal | ☐ New owner ☐ Name or location | on change <u>OVINER</u> | | |
|---|--------------------------------|---|--|------------------|
| Name: | | Name | | |
| Address: | | Address: | | |
| City: | | | State: Zip: | |
| Tel: | Fax: | Tel: | Fax: | |
| General Manager: | | | Cell : | |
| | | | | |
| E-Mail: Send permit and renewal notice to: | | | Date: | |
| | | | | 1 |
| TYPE OF OPERATION | DAY AND TIME OF OPERATION | *EMPLOYEE PERMITS Food Managers: All certified managers: | (This section must be completed) shall be registered with Registered in | Total |
| Restaurant, Cafeteria | OF OPERATION | Fannin County-\$25 for By law, a registered manager shall | r duration of FM pemit. Fannin Coun | |
| School | Mon | Names: (LISTADOITIONAL MANAGERS ON BACK) | Expires: | |
| Convenience Store | Tue | - | | ло |
| Grocery | | , | ges or | no |
| Mobile | Wed | | | no |
| Concession, Carry Out | Thur | | | no |
| Day Care (13 or more children) | | Food Handlers: Any full or part-time pers | | |
| Nursing Home | Fri | • Ice handlers • Bar persons • Dis | shwashers • Day care workers | Handlers |
| Snow Cone (No other foods) | Sat | Cooks Bus persons Butchers, bakers Wait staff | Nursing home workers Concession workers Food sam | pling workers |
| Bed & Breakfast | | TOTAL EMPLOYEES (add Total Manag | | |
| Other: | Sun | PLEASE PROVIDE COPY OF PERMIT C | CARDS FOR ALL EMPLOYEES | |
| LICHID MACTE TRANSPORTER A | IAAAT. | | ANNUAL FEE SCHEDU | ILE |
| LIQUID WASTE TRANSPORTER N | IAME: | | \$300 6 or more Total Emp | loyees |
| Date grease trap was last pumped: | | TCEQ No | \$200 0 to 5 Total Employe | ees |
| | | | \$200 Day Care (13 or mor | re children) |
| This permit is nontransferable. A new permit is required for new owners, change of name, or new location. Nonprofit facilities shall have a 26 USC Section 501c3 exemption on file. A late fee of \$50 is assessed if | | \$100 Inspection Fee | o ormarony | |
| postmarked after expiration date. \$30 fe THIS IS A PUBLIC DOCUMENT AND IT | e for returned checks. No Refu | ınds. | \$50 Late fee (include in | remittance) |
| | HEALTH INSPECTOR USE ONLY | | MAKE CHECKS PAYABLE AMANDA BROGDON | |
| RECEIPT NO: DATE PAID: | | ILED: STED: | NOTE: THE TOTAL NUMBER OF SHALL NOT EXCEED THE NUMBER | EMPLOYEES |
| ANNUAL FEE: | | | ABOVE THROUGHOUT THE DURATE PERMIT. NOTIFY THE HEALTH | ION OF THE |
| LATE FEE: | PERMIT EXF | PIRES ON: | IMMEDIATELY IF EMPLOYEES IN | |

INITIALS:

ADDITIONAL FEE WILL BE REQUIRED.

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PLAN REVIEW APPLICATION FORM

Submit: (1) Completed Application (2) \$125 Fee (Amanda Brogdon) and (3) Copy of Plans to Health Inspector by mail or email. May request online link for payment.

| Name of Facility: | | | |
|----------------------|--|----------------|------------|
| Address of Facility: | | | |
| | | | Zip: |
| Telephone: | Fa | X: | |
| Name & Address of (| Owner/Corp: | | |
| Telephone: | Fax: | | - |
| Name of person in ch | narge: | - _ | - |
| Email: | | | |
| | on: _ New _ Remodeled _ | | |
| | _ Food Service _ Retail Store _ Food Manufacturer _ Swimn | | Commissary |
| Type of Service: Des | scribe nature of operation and m | enu items | |
| Days and Hours of Op | peration: | | |
| APPLICANT NAME: | | | DATE: |
| | HEALTH INSPEC | TOR USE ONLY | |
| RECEIPT NO.: | DATE PAID: | FEE PAID: | INITIALS: |

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PLAN REVIEW FOR RETAIL FOOD ESTABLISHMENTS

| Address of Facility: | | |
|---|---|--|
| City: | State: Zip:_ | |
| Telephone: | Fax: | |
| Instructions: | | |
| Establishment Rules §22 met prior to issuance o assuring that all emplo | establishment have been reviewed. All require 28, as well as local municipality and county of the operating permit. Please note that the byees have obtained proper permits prior estruction standards is attached. | codes, apply and must be owner is responsible for |
| 2. Please correct the items | specified below. | |
| 3. Contact the reviewer whe | n construction is complete for a final pre-opera | tional inspection. |
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| ner | P lanreviewer | Ext |
| e | D ate | _ |

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MOBILE FOOD UNIT REQUIREMENTS

| GENERAL: (Please consult with your local municipality prior to proceeding) All commercial, non-profit, or charitable mobile food units shall comply with these standards to operate. No unit is allowed to operate without wheels unless it meets all requirements of a food establishment with toilet facilities for employees, and is connected to an approved water source and a sanitary sewer or septic system. These minimum standards are applicable throughout the County (inside/outside city limits). Some cities have additional requirements (permits and licenses). |
|---|
| SUBMISSION OF PLANS: Plans and specifications indicating proposed layout, arrangement, mechanical plan, construction plans of existing or proposed unit, types of equipment by models, names and whether it is new or used must be submitted. Plans must also be submitted for all Mobile Food Unit Commissaries if the commissary is not a food establishment with a current health permit. A food menu shall be submitted for the mobile unit. |
| UTENSIL AND EQUIPMENT CLEANING: There must be a three-compartment sink with two drainboards, both made of 18-gauge stainless steel. The sink must have hot and cold water from an approved source. The sink must be of sufficient depth to completely immerse the largest piece of equipment used in the unit. |
| HANDWASHING: There must be a separate lavatory (for washing hands only) with mixing valve or a combination faucet, and hot and cold water. There must be single-service towels and liquid soap by dispenser. |
| GENERAL CONSTRUCTION: _ The unit shall be constructed in a manner as to prevent the entry of insects, dust, dirt, or other foreign matter. _ All interior walls, wall coverings, and ceilings shall be smooth, non-absorbent with easily cleanable surfaces. _ All other exposed wood surfaces must be smooth, sealed, or painted with epoxy type products. _ All edges must be protected, covered, or beveled. Studs, joists, and rafters shall not be exposed. |
| TOILET FACILITIES: Adequate separate toilet facilities must either be provided on the mobile unit or be available at a nearby permanent facility. If a nearby toilet is used, the mobile unit owner/operator must obtain a use-contract with the owner/operator of the nearby toilet for the term of the mobile unit's health permit. A copy of the contract must be provided to the Health Inspector before a Health permit can be issued renewed. Toilet rooms shall conform to all Building, Plumbing and Health Code requirements. Toilet facilities shall be conveniently located and shall be accessible to employees at all times. Toilet rooms shall be completely enclosed, have tight-fitting self-closing solid doors, and have forced-air ventilation to the outside of the unit |
| DOORS AND WINDOWS: Shall be solid or screened (if used for ventilation), and tight-fitting with "no gaps." All doors shall be self-closing. Screening shall be at least 16 mesh. If doors or windows are unprotected/propped open, the unit's health permit will be suspended. |
| COUNTER SERVICE OPENINGS: Service openings shall be no larger than necessary and shall be provided with tight-fitting solid or screened doors &/or windows. Service openings shall be kept closed except when in actual use. |
| VENTILATION: There shall be forced air ventilation with suitable filters located over fryers, grills, and stoves to keep unit free from excessive heat, steam, condensation, vapors, and smoke. All systems must meet Fire Dept Requirements/Fire Codes and have removable, easily cleanable filters. |
| FLOOR CONSTRUCTION: Floors and floor covering shall be constructed of a smooth, durable material such as durable grades of acid resistant linoleum, or better grades of tile. All junctures between floor and walls, equipment, and shelves shall be sealed and covered. Equipment and shelves must be elevated a minimum of 6 inches or sealed to floor. |

__ No carpet is allowed.

FANNIN COUNTY RETAIL FOOD INSPECTIONS

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| TATA | משח | SYSTEM | |
|------|--------|--------|-------------|
| WA | T P. R | 212161 | ΔΙ - |

| WAIER SISIEM. |
|--|
| The unit shall have a portable water system under pressure. The system shall be of sufficient capacity to furnish enough hot and cold water for food preparation, utensil cleaning, sanitizing, and handwashinga 35 gallon minimum. All water connections must meet city/Southern Plumbing Codes. Hoses shall be the white, RV-type, food grade. Documentation shall be provided for the approved water source required for the mobile unit. |
| BACKFLOW AND BACK SIPHONAGE: |
| There shall be a vacuum breaker or backflow prevention device at the potable water supply point where the white water hose connects. The breaker or device shall prevent the contamination of the potable water within the unit and the potable water supplying the vehicle. |
| REFRIGERATED STORAGE: |
| Mechanical refrigeration facilities shall be provided to maintain chilled foods at 32 to 40 F, and frozen foods hard frozen. Each refrigerator shall have a NSF-listed, non-glass, numerical indicating thermometer. Ice chests are unacceptable. |
| WASTE RETENTION: |
| Liquid waste from the mobile food unit shall be stored in a permanently installed retention tank on the unit that is of at least 15 percent larger in capacity than the water supply tank, and no smaller than 40 gallon. Liquid waste shall not be discharged from the retention tank when the mobile food unit is in motion. Receipts must be provided for waste water disposal or documentation were waste water is being disposed. |
| LIGHTING: |
| At least 50-foot candles of light shall be provided to all surfacesfood preparation, utensil-washing, and handwashing. All light bulbs shall be shielded to protect against broken glass falling onto food or food surfaces. |
| ELECTRICAL WIRING: |
| Units must be wired with a N.E.C. approved, commercial use conduit. Units must be grounded with a G.F.I. or protected by same. Units must have a fixed wiring cable of not more than 12 feet of approved commercial type grounded cable. This wire must be of continuous length and permanently attached to the unit via an approved junction box. |
| FIRE EXTINGUISHER: |
| Units must have a minimum of a 5-lb A.B.C. fire extinguisher. |
| CEILING: |
| Units must be protected by a 1-hour fire rated material. |
| OUTSIDE AREAS: |
| Outside walking, driving, and parking areas shall be surfaced with concrete, asphalt, or dustless gravel. The area shall be graded to prevent pooling and shall have no depressions or potholes. The ground must be surfaced for at least 12 feet around the unit and any picnic tables. |
| CONDIMENT DISPENSING: |
| Condiments provided for counter service shall be individually portioned except that catsup and mustard may be dispensed by squeeze bottles. |
| Stirrers and spoons must be of the single-service, disposal type. |
| HOT STORAGE: |
| Hot food storage facilities shall be provided to assure the maintenance of all potentially hazardous foods at 140 F or above. Commercial type crock pots or rotisseries are authorized. Home type crock pots are authorized if they can attain a temperature of 350 F. |

THERMOMETERS:

- __ Each refrigerator/freezer storing potentially hazardous food shall have an accurate, NSF-listed thermometer.
- A metal stem thermometer (0-220 F) is required for the preparation and hot holding of potentially hazardous foods, and utensil/equipment washing.

CHEMICAL TEST KITS:

__ A chemical test kit is required to test the concentration of the sanitizer solution used.

SINGLE SERVICE ARTICLES:

FANNIN COUNTY RETAIL FOOD INSPECTIONS

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__ Single service articles, such as tableware, cups, lids, and carry-out containers, shall be those which are designed and constructed for food contact, and one time, one person use.

WIPING CLOTHS/SANITIZER SOLUTION:

A container with an approved sanitizer (chlorine 100 ppm or quaternary ammonium compound 200 ppm) shall be available during operating hours to hold wiping cloths between uses and to sanitize as required.

HEIMLICH MANEUVER POSTER:

A Heimlich poster must be posted for easy reference by employees.

FIRST AID KITS:

A 24-unit First Aid kit must be available.

GARBAGE/REFUSE CONTAINERS:

- __ All waste containers (inside and outside the unit) shall be durable, easily cleanable, insect-proof, rodent-proof, nonabsorbent to liquids, leak-proof, and lined with a plastic bag.
- __ Containers shall have tight-fitting lids, and shall be kept covered when not in actual use.
- Containers must be provided with handles.
- There shall be at least one waste container outside.
- __ The capacity of outside container(s) shall be sufficient to accommodate all garbage and refuse that accumulates.

COMMISSARY/SERVICING AREA:

- ___ Mobile food units shall operate from and return to a commissary or other food establishment for servicing.
- __ Units shall not remain at their operating site when they are closed.
- ___ A servicing area shall include at least an overhead protection for supplying, cleaning, and servicing, to include water servicing.
- Potable water servicing equipment shall be installed according to law, (bib attached) and handled in a way that protects the water and equipment from contamination.
- Surface of the servicing area shall be constructed of a smooth nonabsorbent material such as concrete or machine-laid asphalt), and shall be maintained in good repair, kept clean, and graded to drain.
- __ Within this servicing area, there shall be a location provided for the flushing and drainage of liquid wastes separate from the location provided for water servicing and for the loading and unloading of food and related supplies.
- The mobile food unit liquid waste retention tank, when used, shall be thoroughly flushed and drained during the servicing operation. All liquid waste shall be discharged to a sanitary sewerage disposal system.

TCF.

- __ lce for human consumption shall not come in contact with any food, food products, or drinks.
- __ lce must be obtained only in chipped, crushed, or cubed form, and in single use, safe, labeled plastic bags (no garbage bags), and filled at point of manufacture or from an approved ice machine.
- __ All ice shall be dispensed using ice scoops or by mechanical dispenser.
- __ If ice is used for human consumption, the ice bin must be continuously drained to waste retention.

HOME CANNED/PREPARED FOODS:

No home-canned or home-processed food is allowed to be sold or given away.

TOXIC MATERIAL STORAGE:

- __ All poisonous or toxic materials shall be stored in cabinets or in similar physically separated compartments or facilities used for no other purpose.
- Such materials shall not be stored above or immediately adjacent to or in areas where food or food-related items are handled, prepared, washed, or stored.

FOOD MANAGER CERTIFICATION/PERMITS AND FOOD HANDLER PERMITS:

- __ At least one on-duty, on-site manager per shift for the establishment must have a current Food Manager Certificate and Permit issued by the Health Inspector for Fannin County.
- __ Local certification and permitting of Food Managers is required in addition to the successful completion of a state approved manager's certification program.
- __ All other employees must have a current Food Handler Permit issued by an approved DSHS vendor.
- __ No Health Permit will be issued until the Certified Food Manager and Food Handler Permit requirements are met.

CONTACT THE HEALTH DEPT:

- (a) By mail, Amanda Brogdon, PO Box 461, Bonham, TX 75418, or
- (b) By phone 903-819-0211, between 7-8 a.m. 1-2 p.m. or after 7 pm. May text or email.

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Restricted Conventional Mobile Food Unit: A truck or trailer limited to serving only prepackaged foods from approved sources that require no further preparation except warming for immediate service. These units may also dispense non-potentially hazardous beverages from protected equipment. Restricted conventional mobile food units are commonly known as cold trucks. These units may operate on private property at one or more locations. The operator of the mobile unit must verify with each municipality prior to operating at that location.

Unrestricted Conventional Mobile Food Unit: An enclosed truck or trailer preparing or serving food that is not prepackaged or does not meet the requirements for a restricted conventional mobile food unit. Unrestricted conventional mobile food units must operate from an approved commissary on a daily basis. These units may operate on private property at one or more locations depending upon owner's permission, and all must comply with city requirements.

Restricted Fixed Location Mobile Food Unit: A mobile food unit limited in size and service serving only prepackaged foods from approved sources that require no further preparation except warming for immediate service. These units may also dispense non-potentially hazardous beverages from protected equipment. These units are limited to operation on the premises of a licensed food establishment that serves as the commissary for the unit or to a specific assigned location. All units must comply with city requirements if operating within their jurisdiction.

Unrestricted Fixed Location Mobile Food Unit: A mobile food unit limited in size and service serving food that is not prepackaged or does not meet the requirements for a restricted fixed location mobile food unit. Unrestricted fixed location mobile food units must operate from an approved commissary on a daily basis. These units are limited to operation on the premises of a licensed food establishment that serves as the commissary for the unit or to a specific assigned location.

REQUIREMENTS FOR PUSHCART

PUSHCARTS: Mobile vending units seeking the Pushcart designation must meet the following criteria. Pushcarts must be non-motorized. They must also be maneuverable by one person when fully loaded. The cart must be constructed of smooth, durable, and easily cleanable surfaces. Unrestricted Pushcarts must also provide three, fully enclosed sides of protection to the food preparation and service area. These sides must extend above the

preparation and service area to the extent that adequate protection from potential contamination is provided. Unrestricted Pushcarts are also required to provide a 3-compartment sink with hot and cold water supplied under pressure, and a hand sink. Additionally, Unrestricted Pushcarts must meet the physical requirements outlined with regards to fresh and wastewater holding tanks and fill and clean-out valves.

Types of Food Approved for Pushcarts: Restricted Pushcart vendors must adhere to the same requirements outlined for all Restricted Mobile Vendor permits. Due to a lack of full enclosure, Unrestricted Pushcart vendors may only offer the following open foods: hot dogs, sausages, frozen treats such as snow cones or ice creams, or other foods specifically approved by the Health Inspector.

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COMMISSARY APPROVAL

PLEASE PRINT NEATLY: INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

| Commissary Name: | | |
|--|----------------------------------|--|
| Address: | | |
| The mobile vehicle listed below has permission | n to use my facilities: | |
| Name of Mobile Unit: | License Plate #: | |
| Name of Vehicle Owner: | Driver's License #: | |
| Telephone #: | Date of Birth: | |
| The following services may be performed at m | y commissary for the above unit: | |
| ☐ Use of my facility at all times | | |
| ☐ Have limited to access to facility; if yes, ac | cess hours are: | |
| ☐ Use of preparation area of the facility | | |
| ☐ Use of utensil washing area of the facility | | |
| ☐ Wash/Clean mobile unit | | |
| ☐ Dispose of waste water | | |
| ☐ Fill potable water tanks | | |
| ☐ Store mobile unit | | |
| Other Information: | | |
| Commissary Owner's Name: | Date: | |
| Commissary Owner's Signature: | | |