



Food Establishment Application
212 Main Street * Lake Dallas, TX 75065
PHONE 940-497-2226 FAX 940-497-4485

Business Information:

Date _____ Sales Tax ID # _____

Business Address _____

State _____ Zip _____

Business Phone _____

Name of business _____

Type of business _____ Sq ft _____

Business Owner Information:

Name _____ E-mail _____

Mailing Address:

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____

Property Owner Information:

Name _____ Phone _____

Address _____ City _____

State _____ Zip _____

General Information:

Preparer's Name _____ Position _____

Emergency Contact _____ Phone _____

Health Permit Information:

Permit #: _____

Permit Fee: _____



Mobile Food Establishment Route Itinerary

Development Services Department 212 Main Street, Lake Dallas, TX 75065* 940.497-2226* 940.497-4485 Fax*

Mobile Food Establishment

Date:	Vehicle License Plate #:
Name of Business:	Driver's License #:
Owner:	VIN #:

STAGE SITE - The City of Lake Dallas Code requires, in part, that "Prior to the issuance of any initial or renewal permit, the operator of a mobile food unit shall submit to the department a list of locations where the mobile food unit will be in operation. The operator shall also give written notice at least two business days prior to beginning operations at or relocating operations to any location not currently included on the list of active locations submitted to the department."

MUST PROVIDE photocopy of owner/operator's driver's license.

MUST PROVIDE signed permission form or provide notarized affidavit from the private property owner granting permission for unit placement.

MUST PROVIDE site plan where the mobile food establishment unit will be located on the property.

Please complete box below before submitting your application for a permit.

Location/Address/Zip Code	Days of Operation	Hours

STANDARD OPERATING PROCEDURES:

This unit's potable water tank will be drained, flushed, and re-filled; the wastewater tank will be drained and flushed; and the unit will be cleaned, on the following days and at the following times: (Food units in operation shall carry valid servicing tickets for service that has occurred within the last 24 hours.)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Name owner/representative: _____

Signature: _____

Date: _____

Staff: _____ Date: _____ Approval: Yes No

Notes: _____



COMMISSARY SERVICE VERIFICATION

*Development Services Department * 212 Main Street, Lake Dallas, Texas 75065 * 940.497-2226 * 940-497-4485 Fax*

It is required that a Mobile Food Establishment be based from an approved commissary (central preparation facility). The commissary is an essential part of a mobile unit's operation and shall have facilities for supply storage, equipment cleaning, food preparation, grease dumping, and other servicing activities. Each commissary shall have a current health permit provided by the authority having jurisdiction of the commissary's location.

MUST PROVIDE a copy of the commissary's health permit and last health inspection.

Primary Commissary Info: Name of Commissary: _____

Address: _____ City: _____ Zip: _____

Contact Person: _____ Title: _____ Phone: _____

Business Hours of Operation: _____

Email: _____

Do other mobile food cart/vehicle vendors use this commissary? Yes No, If "Yes", how many? _____

Indicate which of the following services will be allowed for use at this commissary:

- 3-Compartment Sink
- *Key Accessibility to Commissary (If necessary)*
- Hand Wash Sink*
- Food Prep Sink
- Cooking Equipment
- Commercial Refrigeration Space
- Preparation Table/Equipment
- Dry Storage Space (Linear Feet) _____
- Mop Sink*
- Freezer Space
- Grease Trap*
- Restroom Access*
- Off Street Parking for trucks/trailers
- Ice Machine
- Other:

*Minimum Required Access

(Commissary Owner/Agent – Printed Name & Title)

(Mobile/Vendor – Printed Name & Title)

(Commissary Owner/Agent – Signature & Date)

(Mobile/Vendor – Signature & Date)

This agreement between the owner of the commissary and the owner of the mobile food establishment operation signifies that both parties agree to the allowed use of the commissary as specified.

Note: This agreement is non-transferable and shall be completed each time your health permit is renewed. Should there be a change in the ownership of either the commissary or the mobile food unit, or should there be any modification or cancelation of this agreement between parties, the Consumer Health Inspectors shall be notified or your City of Lake Dallas Food Establishment Permit may be suspended.



Mobile Food Establishment Menu Disclosure

Development Services Department 212 Main Street, Lake Dallas, Texas 75065* 940.497-2226* 940.497-4485
Fax*

For new mobile food establishment units & units changing ownership, fill out before inspection.

Business name:	Owner name:
Mailing address:	Phone #:

1. List names and addresses of businesses or suppliers where you buy your food/supplies.

2. Provide a menu. **Please attach.**

3. **MUST PROVIDE a certified copy of a Food Protection Manager Card.**