



**Department of Code Compliance
Consumer Health Division**

7901 Goforth Rd. Dallas, Texas 75238

Plan Review Application – Mobile Food Vehicle (Hot Trucks) and Trailers

RETURN APPLICATION TO:

Department of Code Compliance
Consumer Health Division
7901 Goforth Rd.
Dallas, Texas 75238
Phone: 214-670-8083
Fax: 214-670-8330

FOR OFFICE USE ONLY

INV# _____

Date Plans Certified _____

Reviewed By _____

The City of Dallas does not accept payments in the field.

Vehicle Information:

Vehicle Name: _____

Vehicle License #: _____

Vehicle Make, Model, Year: _____

Type of mobile food preparation vehicle (Check One): Originally Manufactured Commercially Converted/Retrofitted

Name of Manufacturer: _____

Manufacturer Address: _____ Phone #: _____

Has the vehicle been permitted by the City of Dallas before? _____ If yes, vehicle name under which it was permitted: _____

Previous Owner's Name: _____

Owner Information:

Owner's Name: _____

Mailing Address: _____

Drivers License #: _____ Date of Birth: _____

Contact Phone #: _____ Cell Phone #: _____

Email Address: _____

Plan Review Drawing:

The floor plan drawing should be a good representation of how the vehicle looks in real life. The plan does not have to be professional, but does have to be to scale, detailed and legible. No free hand drawing will be accepted. Drawing "to scale" means that everything is drawn to the correct proportion (**minimum $\frac{1}{2}$ "= 1'**). Two sets of drawings are required showing a top view and both side views. Dimensions must be shown of the overall interior, equipment, plumbing fixtures, and water tanks. Along with the drawing provide a list of all food service equipment used on the vehicle. Include the manufacturer specification sheet of all equipment listed. Submitted plans that are not drawn correct or are incomplete will be returned until finished properly. Once the plans have been accepted as complete, please allow up to **3 weeks** for the review process. An inspector will contact the owner with any questions or to notify of approval. After the plan has been approved a time can be scheduled for an inspection of the vehicle.

Vehicle Design Information:

Describe the construction materials of the following:

Floor _____

Walls _____

Ceiling _____

Counters _____

Provide the dimensions of smallest area of the food service aisle-way: Aisle Width _____ Aisle Height _____

What is the capacity of the water supply tank? _____ Retention Tank? _____

What are the compartment dimensions of the three compartment sink? _____

What are the compartment dimensions of the handwash sink? _____

What type of power source is used to maintain the power demands of the vehicle and equipment? _____

Is all equipment National Sanitation Foundation (NSF) approved? _____

If no, list equipment: _____

Operational Information:

Name of Vehicle Commissary: _____

Commissary Address: _____

Name of Registered Food Manager for vehicle: _____

Food Manager Certificate #: _____ Expiration Date: _____

List all proposed menu items: _____

List all Temperature Control for Safety (TCS) food items that will be stored in a raw state on the vehicle (e.g. beef, eggs, etc.): _____

By signing below, I certify that the information provided on this application is true and correct. I furthermore understand that providing false or fictitious information will render this application invalid.

Signature: _____

Date: _____

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