



NEW-CUSTOM BUILT CARTS

Compact Mobile
Food Operation

APPLICATION PACKET

ENVIRONMENTAL HEALTH DIVISION
5050 COMMERCE DRIVE
BALDWIN PARK, CA 91706

PUBLICHEALTH.LACOUNTY.GOV/EH/

INTRODUCTION

Greetings! Welcome to the Environmental Health Division.

We have created packets for each Compact Mobile Food Operation (CMFO) cart type to help ease your process in getting started on your sidewalk food vending operation journey in Los Angeles County, as efficiently as possible. This packet includes a checklist to guide you through the permitting process as well as documents and applications required by our department, specific to the cart you are purchasing.

CONTENT OF PACKET

- Risk Types & Menu Samples
- Requirements for Risk Types Chart
- Process Road Map
- Custom Built Checklist
- CMFO Plan Check Service Request
- Share Food Facility Agreement - (required if using an alternative commissary)
- Public Health Permit Application
- CMFO Supplemental Application
- Frequently Used Terms

Risk Types

Exempt	Any compact mobile food operation in which only prepackaged non-potentially hazardous food or whole, uncooked produce is sold from an individual, on a stand, a showcase, a rack, or a display that is 25 square feet or less. Health permits and plan reviews do not apply.
Low Risk	Any compact mobile food operation in which only prepackaged non-potentially hazardous food or whole, uncooked produce is sold and is more than 25 square feet.
Moderate Risk	Any compact mobile food operation in which the operator is handling and selling open food that is considered potentially hazardous. This operation requires limited food preparation, but does NOT include raw meat, raw poultry, or raw fish.
High Risk	Any compact mobile food operation in which the operator is handling and selling open food that is considered potentially hazardous. This operation requires limited food preparation and CAN include handling and preparing raw meats, raw poultry, and raw fish.

Menu Examples for Each Risk Type

Exempt	<ul style="list-style-type: none"> • Prepackaged chips • Prepackaged cookies • Candy bars • Bottled drinks: water, sports drinks, sodas, and juices 	<ul style="list-style-type: none"> • Whole uncooked and uncut produce: apples, mangos, bananas, peaches, pineapple, cucumber, cilantro, etc.
Low Risk	<ul style="list-style-type: none"> • Prepackaged chips • Prepackaged cookies • Candy bars • Bottled drinks: water, sports drinks, sodas, and juices 	<ul style="list-style-type: none"> • Whole uncooked and uncut produce: apples, mangos, bananas, peaches, pineapple, cucumber, cilantro, etc. • Prepackaged ice cream bars or popsicles
Moderate Risk	<ul style="list-style-type: none"> • Tamales (Prepackaged, obtained from an approved source such as a market or restaurant) • Hot dogs • Açaí bowls 	<ul style="list-style-type: none"> • Pupusas • Coffee • Scoopable ice cream • Cut fruits
High Risk	<ul style="list-style-type: none"> • Tamales (Prepared and prepackaged at the commissary) • BBQ chicken • Pulled pork sandwiches 	<ul style="list-style-type: none"> • Tacos • Hamburgers • Gyros

Requirements for Each Risk Type

	Exempt	Low Risk	Moderate Risk	High Risk
Structure	Cart, table, stand, rack, or nonmotorized conveyance	Cart only (nonmotorized)	Cart only (nonmotorized)	Cart only (nonmotorized)
Overhead Protection	Yes	Yes	Yes	Yes
Auxiliary Unit (Hand Wash Sink/Warewash Sink)	No	Optional	Optional	Optional
Hand Washing Sink	No	No	Yes, for unpackaged food	Yes, for unpackaged food
3 – Compartment Sink or spare utensils to change out every 4 hours or when contaminated	No	No	Yes	Yes
Within 200 feet of a restroom	No	Yes	Yes	Yes
Inspection Frequency	Based on complaints	Once a every two years	Once a year	Twice a year
Commissary/ Shared Food Facility	No	Yes	Yes	Yes
Public Health Permit	No	Yes	Yes	Yes
Food Handler Card	No	Yes	Yes	Yes
First Aid Kit	No	Yes	Yes	Yes
Mechanical Refrigeration	No	Based on menu	Based on menu	Based on menu
Appointment for cart evaluation	No	Yes	Yes	Yes



NEW CUSTOM BUILT CMFO PROCESS



SUBMIT TO: **PLAN CHECK PROGRAM**
(626) 430-5560

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New Custom Built Compact Mobile Food Operation (CMFO) Checklist

Submit all applicable applications, documents, and fees to the Plan Check Program

Step 1 – Questions on Cart Type/Application? Call **Plan Check Program** at (626) 430-5560.

Submit CMFO Plan Check Application	<input type="checkbox"/>
Submit Written Operational Procedures with Menu	<input type="checkbox"/>
Submit Plans (1 Copy) + Spec sheets/equipment if available (Plans can be submitted online: http://publichealth.lacounty.gov/eh/i-want-to/submit-electronic-plan.htm)	<input type="checkbox"/>
Pay for Plan Check fee	<input type="checkbox"/>

Step 2 – Resubmit, if applicable

Resubmit plans if revisions were needed (Submit 2 copies of the revised plan)	<input type="checkbox"/>
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Step 3 – Build CMFO Cart, after plans are approved

After plan approval from Plan Check Program, complete construction of CMFO cart.	<input type="checkbox"/>
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Step 4 – *After CMFO is Built* - Submit Applications + Documents and Pay for Fees

(For a list of fees, refer to the Fee Schedule: <https://bit.ly/EH-FeeSchedule>)

Submit Commissary Contract dated within the past 30 days or Alternative Commissary Contract (Shared Food Facility Agreement)	<input type="checkbox"/>
Submit Public Health Permit Application	<input type="checkbox"/>
Submit Public Health Permit CMFO Supplemental Application – Indicate the CMFO type applying for, and Home Storage Endorsement, if applicable	<input type="checkbox"/>
Provide Ownership Documents: <div> <div>Sole proprietorship:</div> <div>Copy of driver's license/photo I.D.</div> <div>Corporation or LLC:</div> <div> 1. Copy of the Statement of Information 2. Copy of Articles of Incorporation/Organization 3. Copy of IRS form with employee identification number (tax I.D. #) </div> </div>	<input type="checkbox"/>
Pay Public Health Permit Fee	<input type="checkbox"/>
Pay Shared Food Facility - Dependent Food Operator Evaluation Fee, if applicable	<input type="checkbox"/>
Pay Home Storage Endorsement Evaluation Fee, if applicable	<input type="checkbox"/>

Step 5 – Make Appointment

Make an appointment with the Plan Check Program at (626) 430-5560 for Site (Cart) Evaluation* and for Home Storage Endorsement evaluation and/or shared kitchen facility evaluation, if applicable. *Cart evaluation fee is included in the Plan Check Fee previously paid.	<input type="checkbox"/>
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Step 6 – Evaluation

Note: CMFO cart and home storage location and /or shared food facility may be evaluated at the same time if the cart is located at the same location

CMFO cart is evaluated	<input type="checkbox"/>
Home Location and/or shared food facility is evaluated	<input type="checkbox"/>

Step 7 – Certification + Approval

CMFO will receive certification sticker, and inspection report/approval letter once it passes inspection. The CMFO is then authorized for immediate operation.	<input type="checkbox"/>
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Step 8 – Route Information + Food Handler Card

Submit route information through one of the following platforms: (Failure to submit will be subject to violation): 1. Mobile Food Facility Route Sheet: https://forms.office.com/g/Dys5sQJqPC 2. Post on social media (Facebook, Instagram, Twitter, Yelp, or others) 3. Submit an update at https://trucks.bestfoodtrucks.com/signup/reporting Note: These companies are not endorsed by the Department of Public Health.	<input type="checkbox"/>
Obtain a food handler card within 30 days of operation. Visit www.ansi.org for a listing of Accredited Organizations.	<input type="checkbox"/>

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PLAN CHECK SERVICE REQUEST
COMPACT MOBILE FOOD OPERATION (CMFO)
ENVIRONMENTAL HEALTH - PLAN CHECK PROGRAM
5050 Commerce Drive, Baldwin Park, CA 91706-1423
www.publichealth.lacounty.gov/eh – (626) 430-5560



DATE OF REQUEST: _____

PLAN OWNER (DESIGNER, MANUFACTURER, EXPEDITER, OWNER OF THE BUSINESS)					
NAME:			DESIGNEE/CONTACT:		
MAILING ADDRESS:		UNIT:	CITY:	STATE:	ZIP:
PHONE #:	ALTERNATIVE PHONE #:		E-MAIL ADDRESS:		

Select how you would like to receive reviewed Plan Correction Sheet: ☐ E-mail to Plan Owner ☐ Mail to Plan Owner

Applications and plans will be reviewed upon receipt of fee payment. The initial plan check fee entitles you to two (2) plan reviews and two (2) field inspections, additional plan reviews or inspections will be subject to additional fees.

REGULAR initial plan will be reviewed within 20 business days, EXPEDITED initial plan will be reviewed within 10 business days.			Regular / Expedited
PLAN REVIEW REQUEST:	<input type="checkbox"/>	Prepackaged Potentially Hazardous Foods – see definition below	<input type="checkbox"/> \$439 / <input type="checkbox"/> \$659
	<input type="checkbox"/>	Unpackaged Foods – see definition below	<input type="checkbox"/> \$633 / <input type="checkbox"/> \$950
	<input type="checkbox"/>	CMFO Auxiliary Conveyance, Site Specific – see definition below Hand Wash Sink/Warewash Sink	<input type="checkbox"/> \$487 / <input type="checkbox"/> \$731
	<input type="checkbox"/>	Equipment Evaluation for Replaced Equipment on a permitted CMFO – Equipment to be Replaced: _____ Current PR #: _____	<input type="checkbox"/> \$167 Hourly
	<input type="checkbox"/>	Modification of approved plans – (Provide a brief description of the modification) _____	<input type="checkbox"/> \$167 Hourly
TOTAL DUE:			

CMFO BUSINESS OWNER/OPERATOR				
NAME:		E-MAIL ADDRESS:	PHONE #:	
MAILING ADDRESS:	UNIT:	CITY:	STATE:	ZIP:

PLAN CHECK PROCESS	• Incomplete applications will not be processed.
	• Submit one (1) copy of plans with your application. Submit two (2) copies of the plans if plans were revised.
	• The proposed menu and Written Operating Procedure must be submitted with the plans for new construction, evaluation, or renovation.
	• Provide Equipment Manufacturer Specification Sheets.
	• Provide a Site Plan if you are applying for an Auxiliary Conveyance plan review.
	• Provide a copy for your current Public Health Permit for renovation to CMFO/equipment.
	• Plan Check will contact you after the plans are reviewed.
	• You must obtain approved plans from Plan Check Program before construction or installation of any equipment.
	• Contact the Plan Check Programs at (626) 430-5560 if you have questions.

SUBMISSION	<p>Submit plans & application online: Approved plans will be accessible from the SharePoint site. http://www.publichealth.lacounty.gov/eh/i-want-to/submit-electronic-plan.htm</p> <p>-or-</p> <p>Submit in-person at any of our Plan Check locations: Approved plans must be picked up in-person from our Plan Check office. http://www.publichealth.lacounty.gov/eh/about/plan-check-program.htm</p>	PAYMENT
	<ul style="list-style-type: none"> • If plans are submitted online, an invoice will be generated and emailed to you along with payment instructions. • Do not submit your payment until you have received an invoice. • Include your invoice number if paying by mail. 	

Pay Online:

Pay online using Credit Card (Visa, MasterCard, American Express, or Discover), Debit Card, and Electronic Check (ECheck).

Please note that there is an additional convenience fee charge using online payment.

Pay by Mail:

Make **Check, Cashier's Check, or Money Order** payable to: County of Los Angeles

Mail to:
 Department of Public Health
 5050 Commerce Drive
 Baldwin Park, CA 91706

Pay In-Person:

Make payment in person at any Environmental Health office locations throughout Los Angeles County, between the hours of 8:00 am - 4:30 pm, Monday through Friday. Acceptable forms of in-person payment include **Cash, Check, Cashier's Check, or Money Order** in the exact amount due. Check our website for locations at <http://www.publichealth.lacounty.gov/eh/about/plan-check-program.htm>

OWNER REPRESENTATIVE DECLARATION:	<p>I understand the amount of fee paid is NON-REFUNDABLE and the application is NON-TRANSFERABLE. The fee paid is based on my declaration of the business classification indicated above. If this declaration is incorrect, I understand that the plans will not be reviewed until the correct fee is paid. I also understand that plans shall be reviewed within 20 (regular) or 10 (expedited) working days after receipt of payment and the REVIEWED PLANS (WHETHER APPROVED OR NOT) ARE VALID FOR ONE YEAR. FINALLY, I UNDERSTAND PLANS MUST BE APPROVED PRIOR TO COMMENCING CONSTRUCTION OR INSTALLING ANY EQUIPMENT, AND IT IS A VIOLATION TO BEGIN OPERATION WITHOUT FINAL INSPECTION, APPROVAL, AND VALID PUBLIC HEALTH PERMIT.</p> <p><u>Plans will only be released to the plan owner.</u></p>

SIGNATURE: _____ **DATE:** _____

DEFINITIONS
<p>PREPACKAGED POTENTIALLY HAZARDOUS FOODS: Food items that require temperature control to prevent the growth of harmful bacteria and are served directly to the customer in its unopened, original container or packaging, that is prepared and properly labeled from a manufacturer, a commissary, or other food facility. (Examples: tamales and fruit bowls)</p> <p>Sink Requirement: N/A</p>
<p>UNPACKAGED FOODS: Food items that are assembled and served to the customer as part of Limited Food Preparation food operation as defined in Division 104, Part 7, Chapter 2, Section 113818 of the California Health and Safety Code. (Examples: hot dogs, tacos, cut fruit, shaved ice, roasted nuts, popcorn, or churros)</p> <p>Sink Requirement: Handwash sink is required; hot water not required. If the operator handles raw meat, fish, or poultry on the CMFO, a 3-compartment sink with hot water for utensil washing is required or have enough spare utensils to change out every 4 hours or when contaminated.</p>
<p>CMFO AUXILIARY CONVEYANCE – SITE SPECIFIC: A separate component that is used in conjunction with carts, at a site-specific location that do not have a sink, to provide the necessary handwashing and warewashing required for operation. This is an optional component and is only required if the cart does not have the equipment that is needed to operate. This option is only available when the CMFO operates on private property or when issued a site-specific permit by the local jurisdiction.</p>

FOR OFFICE USE		
CONTACT OFFICE	PAYMENT	PLAN CHECK NUMBER
	Amount Paid: _____ Date paid: _____ Receipt #: _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ Cashier's Initials: _____	SR _____



SHARED FOOD FACILITY AGREEMENT

Environmental Health Division
5050 Commerce Drive, Baldwin Park, CA 91706
www.publichealth.lacounty.gov/eh | (888) 700-9995



This agreement must be signed by both the Permitted Food Facility (PFF) Operator and the Dependent Operator (e.g., Compact Mobile Food Operator (CMFO) or Temporary Food Facility (TFF)).

DEPENDENT OPERATOR'S BUSINESS INFORMATION

Name of Business:				Program Record#:	
Business Address:		Unit:	City:	Zip:	
Name of Owner(s):					
Mailing Address:		Unit:	City:	State:	Zip:
Email:		Phone Number:			

PROPOSED DEPENDENT OPERATION

Where/How will food be sold? ☐ Mobile Food Facility (MFF)/CMFO ☐ Temporary Food Facility

Type of Food Service Conducted (check all that apply)

<input type="checkbox"/> Low Risk – Prepare/package only non-potentially hazardous foods or packaged ice cream bars and paletas.	<input type="checkbox"/> Moderate Risk – Food preparation is limited to preparation for same-day service; prepared foods that are not sold or served the same day are discarded.	<input type="checkbox"/> High Risk – Offer a menu that involves the preparation of potentially hazardous food (PHF) and the PHF travels through the temperature danger zone (41-135°F) more than once.
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HOURS OF OPERATION

DAYS	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
START TIME							
END TIME							

PERMANENT FOOD FACILITY - EQUIPMENT OVERVIEW

1. Do you require new equipment that is currently not available in the PFF? ☐ Yes ☐ No
If yes, identify the type of equipment (attach Equipment Specification Sheet): _____
2. What equipment/utensils/sinks at the PFF do you plan to use:
- ☐ Cooking equipment ☐ Prep tables ☐ Handwashing sinks ☐ Food prep sink ☐ Mop sink
☐ Utensil washing sink ☐ Refrigerator ☐ Other: _____
3. What do you do with leftovers: _____ ☐ N/A

FOOD FLOW OVERVIEW

FOOD DELIVERY: All food ingredients must be obtained from an approved source; maintain receipts.

FOOD STORAGE: Identify amount of shelving utilized (label with the name of your business):

Dry Storage _____; Refrigerated Storage (41°F) _____; Frozen Storage _____

PERMANENT FOOD FACILITY OPERATOR'S INFORMATION

Facility Name:		Contact Person:		Program Record#:	
Facility Address:		Unit:	City:	Zip:	
Email:		Phone Number:			

PERMANENT FOOD FACILITY – CMFO CLEANING AND STORAGE

To support the cleaning of a CMFO food cart, the PFF must have a wash down area that is protected from the elements and includes hot and cold running water and drainage to a public sewer.

1. Are there facilities to allow for the proper cleaning of the cart? ☐ Yes ☐ No

If yes, check each required item: ☐ Wash down space with hot & cold-water lines (if outdoors, must have overhead protection)

☐ Backflow prevention device for water lines ☐ Waste tank disposal of liquid waste (e.g., floor sink, floor drain, trench drain, mop sink)

2. Is there a potable water connection to fill freshwater tanks? ☐ Yes ☐ No

3. Is there a vermin proof area to store the CMFO? ☐ Yes ☐ No

If no, the Dependent Operator must have an alternative, approved storage location for the CMFO.

FOOD PRODUCTION: Describe the following with as much detail as possible. Indicate Not Applicable (NA) as appropriate.
(*Equipment – must be NSF approved or equivalent)

PROCESS	IDENTIFY FOOD ITEMS	INDICATE LOCATION AND EQUIPMENT*
Washing of Produce		
Thawing		
Cooking (A food temperature measuring device shall be available)		
Slicing, Chopping or Assembly of Food Items		
Hot Holding (Hot food maintained at 135°F) or above		
Cooling (PHF food will be cooled to 41°F within 6 hours; 135°F to 70°F in 2 hours)		
Reheating (Food must be reheated to a temperature of 165°F for 15 sec within 2 hours)		
Food Transportation (Identify how foods will be protected from contamination and maintained hot/cold)		

CONDITIONS OF APPROVAL

- If significant or major violations are noted as a result of sharing the Permanent Food Facility (PFF), Environmental Health (EH) has the right to rescind the permission of use by the Dependent Operator to conduct the food activities as described above.
 - EH may conduct inspections and investigate consumer complaints associated with the food business sharing the PFF and any violations noted will be cited on the PFF official inspection report.
 - The Dependent Operator must immediately cease all operations in the event that the PFF permit is suspended or that an imminent health hazard exists that includes, but is not limited to a vermin infestation, lack of hot water, a sewage system backup/failure, etc.
 - The PFF assumes all responsibility for any health code violations which may occur while the facility is being used for this purpose. Such violations may be included on an inspection report for the PFF and may affect the score and grade of the PFF.
 - ☐ I am taking responsibility for all health code violations of the Dependent Operator, while operating in this PFF
 - ☐ I am not taking responsibility for all health code violations of the Dependent Operator, while operating in this PFF. The Dependent Operator needs to obtain a separate permit.
 - The PFF and Dependent Operator will comply with all applicable laws.
 - The PFF will notify EH in writing within 10 days of severance of this agreement.
- I understand this agreement and declare the information above to be accurate and correct.***

Permanent Food Facility (PFF) Operator

The person listed below has my permission to prepare food for sale from my facility on the days and time(s) listed above and store food and equipment in my food facility.

Name of PFF Operator/Legal Representative:

Signature:

Date:

Dependent Operator

I agree to use the above food facility to store food and equipment and for the preparation of food for the MFF/CMFO or TFF. I understand that if I no longer prepare food at this facility, I must obtain another agreement for the use of a permanent food facility or discontinue food preparation.

- ☐ *I agree to comply all health code requirements.*
- ☐ *I understand that I must have a separate Dependent Operator permit.*

Name of Dependent Operator:

Signature:

Date:

SUBMISSIONS:**For MFF/CMFO:**

Standard Plan Cart/Previously Permitted Cart/MFF: Submit the completed application to the Mobile Food Program at ehvip@ph.lacounty.gov or call (626) 430-5500 for questions.

New Custom Built Cart: Submit the completed application to the Plan Check Program at DPH-PlanCheck_Food@ph.lacounty.gov or call (626) 430-5560 for questions.

For TFF:

Community Events associated with a Certified Farmers' Market: Submit the completed application to the Specialized Food Services Program at ehsfs@ph.lacounty.gov or call (626) 430-5421 for questions.

Community Events *NOT* associated with a Certified Farmers' Market: Submit the completed application to the Community Events Program at communityevents@ph.lacounty.gov or call (626) 430-5320 for questions.

OFFICE USE ONLY

This agreement has been approved by:

Date:

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PUBLIC HEALTH PERMIT/LICENSE APPLICATION

Environmental Health Division

5050 Commerce Drive, Baldwin Park, CA 91706

www.publichealth.lacounty.gov/eh

(888) 700-9995



Please fill out each section completely by printing or completing fillable PDF. See [page 2](#) for instructions, list of required documents to be submitted with your application, and instructions for payment.

Date of Application: _____

Select One: ☐ New Business

First Date of Operation: _____

☐ Change of Ownership

BUSINESS TYPE	
A separate application is required for each business type. Businesses noted with a red asterisk (*) also require a supplemental application to be completed. These can be found on our website at http://publichealth.lacounty.gov/eh/about/permit.htm .	
<input type="checkbox"/> Animal Keeper*	<input type="checkbox"/> Food Facility
<input type="checkbox"/> Boarding Home	<input type="checkbox"/> Garment Manufacturing*
<input type="checkbox"/> Body Art*	<input type="checkbox"/> Hotel or Motel*
<input type="checkbox"/> Cannabis*	<input type="checkbox"/> Interim Housing Facility
<input type="checkbox"/> Commercial Laundry*	<input type="checkbox"/> Laundry Self-service
<input type="checkbox"/> Certified Farmers Market	<input type="checkbox"/> Massage Establishment*
<input type="checkbox"/> Condominiums	<input type="checkbox"/> Mobile Food Facility*
<input type="checkbox"/> Public Swimming Pool	<input type="checkbox"/> Residential Hotel/Single Room Occupancy
<input type="checkbox"/> Self-hauler (Municipal Solid Waste)*	<input type="checkbox"/> Sewage Pumper Truck
<input type="checkbox"/> Shared Kitchen Complex*	<input type="checkbox"/> Solid Waste Facility
<input type="checkbox"/> Theater	<input type="checkbox"/> Toilet Rental Agency
<input type="checkbox"/> Vending Machine	<input type="checkbox"/> Waste Collector*
<input type="checkbox"/> Water Systems (Public)	<input type="checkbox"/> Wiping Rag Facility*
<input type="checkbox"/> Other: _____	

BUSINESS INFORMATION		LEGAL NAME OF BUSINESS (DBA): _____	
Business Street Address		Unit	City
Phone		Email Address (for Reports & Communications)	Website address
Hours of Operation:	<input type="checkbox"/> 24 Hrs.	Open: M: _____ T: _____ W: _____ Th: _____ F: _____ Sa: _____ Su: _____	Closed: M: _____ T: _____ W: _____ Th: _____ F: _____ Sa: _____ Su: _____

OWNERSHIP INFORMATION		Type: <input type="checkbox"/> Individual/Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> LP <input type="checkbox"/> LLP <input type="checkbox"/> Corporation <input type="checkbox"/> LLC			
Name		Phone		Email	
OWNER 1:					
OWNER 2:					
Emergency Contact:					

BILLING INFORMATION		<input type="checkbox"/> Use business address for billing <input type="checkbox"/> Send billing to address below:		
Street Address	Unit	City	State	Zip

TERMS	I HEREBY SUBMIT THIS APPLICATION FOR A PUBLIC HEALTH PERMIT/LICENSE to conduct the above-mentioned business, occupation or other activity in accordance with the laws, ordinances, and regulations that are now or may hereafter be in force pertaining to the above-identified facility. I certify that I am the owner or authorized representative of this business and that all statements are true to the best of my knowledge. After issuance of the public health permit/license, I hereby consent to all necessary inspections conducted by the Department of Public Health, Environmental Health Division.	
	I understand that Public Health Permits/License are not transferable and non-refundable. I understand that refunds may be considered only when funds are collected in excess, erroneously, or as double payment. I shall notify this agency in writing if I transfer ownership, discontinue operation or change the billing address. I understand that failure to do so may result in an obligation to pay additional penalties.	
	I understand that a failure to maintain a current Public Health Permit/License may result in the closure of the facility, pursuant to Los Angeles County Code, California Health and Safety Code, and/or applicable local ordinances.	
	I understand that any construction, alteration or repair, including, but not limited to, equipment changes or alterations, a menu change, or change in method of operation requires review and approval by Department of Public Health, Environmental Health Division.	
Print Name:		Title:
Signature:		Date:

OFFICE USE ONLY			
Amount Owed:	(To be determined by Specialist on date of approval)	Payment Due By:	SR #:
PE Code:	PE Description:	Billing Status:	Invoice #:

Welcome to Los Angeles County! Our goal at Environmental Health is to partner with you to ensure that your facility meets all regulatory health and safety requirements. Obtaining your Public Health Permit or License is the first step.

INSTRUCTIONS

1. Please print or complete using fillable PDF.
2. All fields must be completed. Enter N/A if a field is not applicable to the business. If the information entered is the same for multiple fields, such as the Billing Mailing Address, reenter that information – do not use “same as above.”
3. Fill out the date of the application, first date that your facility starts or started operation, and indicate if this is application is for a NEW facility or for a Change of Ownership.
4. Check the type of business you are applying for. For businesses that have a red asterisk (*) you will also need to submit a Supplemental Application that asks specific information for that facility type. Applications can be found on our website at <http://publichealth.lacounty.gov/eh/about/permit.htm>.
5. Provide the business: name, address, phone, email, website, and hours of operation. The business email will be where inspection reports will be sent to and where Public Health may send communications.
6. Indicate the type of ownership and provide the owner’s name(s), phone and email. Include an emergency contact.
7. Indicate if the billing address is the same as the business address. If not, provide the desired billing address.
8. Read all information in the Terms section and acknowledge by printing your name and signing the application.

ADDITIONAL DOCUMENTS

The following documents must be submitted to process your request:

- ✓ Completed **Supplemental Application** – only for businesses with a red asterisk * on page 1 of the application
- ✓ Copy of the supporting documentation of the “person” who is legally responsible for the operation of the business:
 - **Sole Proprietor or Partnership** – a current driver’s license, state issued identification card, or Foreign Consulate Identification Card for each owner
 - **Limited Partnership (LP)** - Certificate of Limited Partnership
 - **Limited Liability Partnership (LLP)** - Limited Liability Partnership (LLP) Registration
 - **Limited Liability Company (LLC) with one member** - a current driver’s license, state issued identification card, or Foreign Consulate Identification Card
- ✓ For **Corporations** and **Limited Liability Company (LLC) with multiple members**, include copy of:
 1. **Employer identification Number (EIN) statement from IRS, AND**
 2. CA Secretary of State **Statement of Information, or Articles of Organization**, including a list of the officers’ names and titles
- ✓ Copy of **Business License** or **Seller’s Permit**. If you have both please provide copies of each.

SUBMISSION AND PAYMENT

The application(s), supporting documents, and payment can be submitted in person, by mail, or by email as noted below. Failure to submit the completed application and payment of the permit or license will impede the issuance of the permit or may result in the closure of the facility and may be subject to a penalty not to exceed three times the cost of the permit.

Online	Mail	In Person
Customers can pay online using their Credit Card (Visa, MasterCard, American Express, or Discover), Debit Card, and Electronic Check (ECheck). Please note that there is an additional convenience fee charge using online payment. Contact us at (888) 700-9995, select your language option, then dial Option 1 or ehpermits@ph.lacounty.gov for more information.	Send your Check, Cashier's Check, or Money Order, payable to the County of Los Angeles , to: Department of Public Health 5050 Commerce Drive Baldwin Park, CA 91706	Customers may make payments in person at Environmental Health office locations throughout Los Angeles County. Acceptable forms of payment in-person include Cash, Check, Cashier's Check, or Money Order. Payments will be accepted between the hours of 8:00 am - 4:30 pm, Monday through Friday. Cash payments may only be in person, and in the exact amount due. Check our website for locations at http://publichealth.lacounty.gov/eh/

The Public Health Permit/License, once issued, is nontransferable. A permit/license is only valid for the person, location, type of activity and time period indicated. Refunds may be considered only when funds are collected in excess, erroneously, or as double payment.

INFORMATION SECURITY

All owner personal information (phone, email) on applications is kept confidential. Do not provide a copy of your Driver’s License or Identification through email unless you have received an encrypted email from a Department of Public Health team member first. The subject line of the encrypted email will include this text: **[SECURE]**. Your documents can be submitted safely by replying to the **[SECURE]** email and attaching your documents.

If you have any questions, please contact the Environmental Health Division at **(888) 700-9995**.



PUBLIC HEALTH PERMIT/LICENSE - SUPPLEMENTAL APPLICATION

COMPACT MOBILE FOOD OPERATION (CMFO)

Environmental Health Division

5050 Commerce Drive, Baldwin Park, CA 91706-1423

www.publichealth.lacounty.gov/eh



☐ **New, custom built CMFO –**

Contact the **Plan Check Program** at (626) 430-5600 to request a secure email to submit personal documents safely.

☐ **CMFO built with Standard Plan or Change of Ownership of a Previously Permitted CMFO –**

Contact the **Mobile Food Program** at (626) 430-5500 to request a secure email to submit personal documents safely.

Date of Application:	Legal Name of Business (DBA):
SERVICE REQUEST	
Select which service is being requested:	SERVICE FEE
<input type="checkbox"/> Low Risk CMFO – Model (Standard) Plan Site Evaluation Provide an Attestation Letter for Standard Plan or prior Certification sticker on CMFO	\$167 Hourly
<input type="checkbox"/> Moderate Risk CMFO (Prepackaged Hot-Holding) – Model (Standard) Plan Site Evaluation Provide an Attestation Letter for Standard Plan or prior Certification sticker on CMFO	\$246
<input type="checkbox"/> High Risk CMFO (Unpackaged Food Handling) – Model (Standard) Plan Site Evaluation Provide an Attestation Letter for Standard Plan or prior Certification sticker on CMFO	\$285
<input type="checkbox"/> Dependent Food Operator Evaluation (Evaluation of a Restaurant, Food Market, or Community Kitchen for use as a Commissary)	\$167 Hourly
<input type="checkbox"/> Home Storage Endorsement (Evaluation to determine if a home can support the storage of up to two CMFOs)	\$199

FACILITY TYPE	Select Type of Permit (One application per CMFO) – See page 2 for definitions.	PERMIT FEES
	<input type="checkbox"/> CMFO – Low Risk	\$126
	<input type="checkbox"/> CMFO – Moderate Risk	\$299
	<input type="checkbox"/> CMFO – High Risk	\$592
	<input type="checkbox"/> Mobile Support Unit	\$313
	<input type="checkbox"/> Dependent Food Operator (Provide a separate Shared Food Facility Agreement)	\$309
	<input type="checkbox"/> CMFO Auxiliary Conveyance Operator*, Site Specific	\$487
Total Due:		

PREVIOUSLY PERMITTED CMFO

County of Approval: _____ Plan Check Service Request #: _____

HOME STORAGE	Resident Contact:	Phone #:
	Street Address:	Unit:
	City:	Zip Code:
	Cart Storage Location (i.e. – garage):	Food Storage Location (i.e. – kitchen):

Certified Food Handler (CFH) Card Obtained:

☐ Yes ☐ No – Provide proof of CFH card within 30 days of the start of operation to ehvip@ph.lacounty.gov.

Failure to submit certification is a violation.

I hereby certify under penalty of perjury that the above information is true and correct and will operate my CMFO in compliance with the requirements set forth in the California Health and Safety Code. Any changes to approved operations must be reported to this Division in writing prior to change.

Signature:	Title:
Print Name:	Date:

SUBMIT THE APPLICABLE DOCUMENTS WITH THIS APPLICATION:

- ☐ **Commissary Contract** dated within the past 30 days or **Shared Food Facility Agreement** to indicate where food will be prepared and stored (if not requesting a Home Storage Evaluation), and where CMFO will be cleaned and have maintenance.
- ☐ **Written Operational Procedures + Menu** for the CMFO.
- ☐ **Attestation Letter**, for Standard Plan CMFO only.
- ☐ **Ownership Document**: Valid Driver's License or California I.D., DMV Registration for vehicle (if applicable), and Articles of Incorporation (if applicable)

DEFINITIONS

COMPACT MOBILE FOOD OPERATION – LOW RISK:

- A. An individual stand, showcase, rack, or display approved for the sale of more than 25 square feet of prepackaged non-potentially hazardous food and whole uncut produce.
- B. A pushcart, peddle-driven cart, wagon, or other unenclosed non-motorized conveyance that is approved for the sale of more than 25 square feet of prepackaged non-potentially hazardous food. (*Examples: pre-packaged ice cream bars, bags of chips, bottled beverages, and whole produce such as apples, bananas, or peaches*)

COMPACT MOBILE FOOD OPERATION – MODERATE RISK: An unenclosed, non-motorized conveyance, such as a pushcart, peddle-driven cart, or wagon that is approved for sale of prepackaged potentially hazardous foods and/or limited food preparation that does not include raw meat, raw poultry, or raw fish. (*Examples: coffee cart, tamale cart, or fruit-bowl cart*)

COMPACT MOBILE FOOD OPERATION – HIGH RISK: An unenclosed, non-motorized conveyance, that is approved for limited food preparation as defined in California Health and Safety Code Section 113818, including the preparation of raw meat, raw poultry, or raw fish and meets the requirements for mobile food facilities as defined in Division 104, Part 7, Chapter 10 of the California Health and Safety Code. (*Examples: taco cart, burger cart, BBQ cart*)

MOBILE SUPPORT UNIT: Vehicle used in conjunction with a commissary or other permanent food facility that travels to and services Mobile Food Facilities as needed to replenish supplies, including food and potable water, clean the interior of the unit, or dispose of liquid or solid wastes.

DEPENDENT FOOD OPERATOR: A person that has been approved by a County Health Officer to operate within a permanent food facility when the primary permit holder is not operating the permanent food facility.

***CMFO AUXILIARY CONVEYANCE OPERATOR – SITE SPECIFIC:** A person who is responsible for facilities, including the handwashing and warewashing auxiliary conveyances, that are shared by two or more compact mobile food operations that are permitted to operate at a site-specific location.

OPTIONS FOR CMFO FOOD PREPARATION, CLEANING, AND STORAGE

A CMFO that conducts limited food preparation on the cart may:

- Prepare food at a commissary, in a permitted food facility with a Shared Food Facility Agreement, or in a permanent food facility with a dependent food operator permit.
- Purchase prepared food from a permitted restaurant or food market.
- Clean the cart at a commissary, in a permitted food facility with a Shared Food Facility Agreement, or in a permanent food facility with a dependent food operator permit.
- Store potentially hazardous food in a commissary, permitted restaurant, or food market.
- Store the cart at a commissary, permitted food facility, or a home endorsed by the Public Health Department.

A CMFO that sells prepackaged non-potentially hazardous foods:

- May store the cart and non-potentially hazardous foods at a home endorsed by the Public Health Department.

NOTE: CMFO will need to be onsite of the home evaluation or at the shared food facility, if applicable.

OFFICE USE ONLY

Reviewed and verified by:

Print Name

Invoice # _____ Date: _____

Old account to be inactivated, if applicable:

FA: _____ PR: _____

FREQUENTLY USED TERMS

Term	Definition from the California Retail Food Code	Plain Language
Approved Source	A food source, or a producer, manufacturer, distributor, or food facility that is acceptable to the enforcement agency based on a determination of conformity with applicable laws, or, in the absence of applicable laws, with current public health principles and practices, and generally recognized industry standards that protect public health. *	Food that comes from a manufacturer or a store that holds a Public Health Permit and is a trusted source.
Auxiliary Unit	A separate component that is used in conjunction with carts that do not have a sink to provide the necessary handwashing and warewashing required for operation. This is an optional component and is only required if the cart does not have the equipment that is needed to operate. *	A component that is not attached to the cart that is being used to satisfy the requirements for operation: i.e., if the cart does not have a built-in handwashing/warewashing sink.
Cart	A nonmotorized vehicle or conveyance with wheels used to move items. **	A table with wheels that is used especially for serving food.
Certified Food Handler Card	Food facilities that prepare, handle, or serve non-prepackaged potentially hazardous food, except temporary food facilities, shall have an owner or employee who has successfully passed an approved and accredited food safety certification examination. *	A certification that proves that an employee or employer has passed an exam from an accredited organization on food safety. This is required for all employees who are involved in the preparation, storage, or service of food.
Commissary	A food facility that services mobile food facilities, mobile support units, or vending machines where any of the following occur: (a) food, containers, or supplies are stored, (b) food is prepared or prepackaged for sale or service at other locations, (c) utensils are cleaned, and (d) liquid and solid waste are disposed, or potable water is obtained. *	A shared kitchen space used to prepare food, sanitize utensils, dispose of waste, and store equipment for a Compact Mobile Food Operation.
Commissary Contract	A binding agreement between a CMFO and a permitted food facility that gives the operator of the CMFO the authorization to prepare food, wash utensils and equipment, and store and maintain the cart when it is not in operation.	A contract that proves the operator of the CMFO has access to a commissary and is using the commissary for their food operation, preparation, and/or storage.
Compact Mobile Food Operation (CMFO)	A mobile food facility that operates from an individual or from a pushcart, stand, display, pedal-driven cart, wagon, showcase, rack, or other nonmotorized conveyance. *	A nonmotorized portable food business.

Compact Mobile Food Operation Plan Check Application	The application that is required for a new Custom-Built CMFO and is submitted to the Plan Check Program.	An application needed for Custom-Built Carts to receive approval from the Plan Check Program.
Compact Mobile Food Operation Supplemental Application	An additional form that accompanies the Public Health Permit (PHP) application to provide extra information to support the purpose of applying for a PHP.	A form to provide extra information on the reason for applying for a Public Health Permit.
Custom Built Carts	A new personalized cart built from a blueprint/plan tailored to meet the requirements needed based off the CMFO menu.	A new personalized cart built to support the menu or operation of the CMFO.
Display Rack	A framework, stand, or grating on or which articles are placed. **	A stand in which you can place items on.
Evaluation	An inspection that is conducted by the Department of Public Health/Environmental Health Division inspectors to verify if a Compact Mobile Food Operation or a Mobile Food Facility meets all requirements to operate as a food business.	An inspection of a Compact Mobile Food Operation or Mobile Food Facility by the Environmental Health Division.
Exempt (CMFO)	Any compact mobile food operation with 25 square feet or less of display area from which only prepackaged nonpotentially hazardous food and whole uncooked produce is sold and is exempt from certain requirements. *	A compact mobile food operation that sells only prepackaged, nonpotentially hazardous food or whole uncooked produce in a space that is 25 square feet or less.
High Risk (CMFO)	Any compact mobile food operation in which the operator is handling and selling open food that is considered potentially hazardous. This operation often requires limited food preparation and can include handling and preparing raw meats, raw poultry, and raw fish.	A compact mobile food operation in which open food is being handled and sold. Limited food preparation of raw meat, raw poultry, or raw fish is allowed.
Home Endorsement Report	For the purposes of this chapter, an endorsement by the local ENFORCEMENT AGENCY shall be a documented and recorded approval of compliance with applicable sections. An endorsement may include an inspection or evaluation but shall not require a registration or PERMIT. *	A document issued by the Environmental Health Division showing compliance with code requirements.
Limited Food Preparation	Food preparation that is restricted to one or more of the following: (1) Heating, frying, baking, roasting, popping, shaving of ice, blending, steaming, or boiling of hot dogs, or assembly of non-prepackaged food. (2) Dispensing and portioning of nonpotentially hazardous food or dispensing and portioning for immediate service to a customer of food that has been temperature controlled until immediately prior to portioning or dispensing.	Food that requires minimal preparation to decrease the potential risk of exposing the public to food borne illness or other health hazards.

	<ul style="list-style-type: none"> (3) Holding, portioning, and dispensing of any foods that are prepared for satellite food service by the onsite permanent food facility or prepackaged by another approved source. (4) Holding, portioning, and dispensing of any foods that are prepared by a catering operation. (5) Slicing and chopping of nonpotentially hazardous food or produce that has been washed at an approved facility or slicing and chopping of food on a heated cooking surface during the cooking process. (6) Cooking and seasoning to order. (7) Juicing or preparing beverages that are for immediate service, in response to an individual consumer order, that do not contain frozen milk products. (8) Hot and cold holding of food that has been prepared at an approved permanent food facility. (9) Reheating of food that has been previously prepared at an approved permanent food facility and held at temperatures required by this chapter. * 	
Low Risk (CMFO)	Any compact mobile food operation over 25 square feet from which only prepackaged nonpotentially hazardous food and whole uncooked produce is sold.	A compact mobile food operation that is more than 25 square feet and only sells prepackaged food or whole uncooked produce.
Mechanical Refrigeration	A mechanical unit that extracts heat from an area through liquefaction and evaporation of a fluid by a compressor, flame, or thermoelectric device, and includes a mechanical thermostatic control device that regulates refrigerated blown air into an enclosed area at or below the minimum required FOOD storage temperature of POTENTIALLY HAZARDOUS FOODS. *	Food storage in a refrigerator to be kept cold at a specific temperature to keep the food from spoiling and growing bacteria. A refrigerator to store food at a specific temperature to keep it from growing bacteria and going bad.
Mobile Food Facility (MFF)	Any vehicle used in conjunction with a commissary or other permanent food facility upon which food is sold or distributed at retail. This does not include a “transporter” used to transport packaged food from a food facility, or other approved source to the consumer. *	A motorized vehicle used to sell food but does not include vehicles used to transport food between the food facility and the consumer.
Mobile Food Facility Route Information (Route Slip)	A requirement in which all mobile food facilities provide their route information and scheduled hours of operation to the Department of Public Health/Environmental Health Division. This can be done by, 1) Posting the location and operating hours on social media; 2) Submitting an update at	Required information provided from all mobile food facilities to inform the Environmental Health Division of their route information and operating hours. This information can be provided through social media,

	BestFoodTrucks.com, or 3) Directly emailing, faxing, or mailing a route slip to the Mobile Food Program.	online, or by sending the information to the Mobile Food Program.
Mobile Support Unit	Vehicle used in conjunction with a commissary or other permanent food facility, that travels to, and services Mobile Food Facilities as needed to replenish supplies, including food and potable water, clean the interior of the unit, or dispose of liquid or solid waste. *	A vehicle used in combination with the cart for operational services including replenishing supplies.
Moderate Risk (CMFO)	Any compact mobile food operation in which non-prepackaged food is sold and the operator is now handling open food. This operation often requires limited food preparation, but does not include raw meat, raw poultry, or raw fish.	A compact mobile food operation in which open food is being handled and sold. Limited food preparation is allowed, but handling raw meat, raw poultry, or raw fish is not allowed.
Nonmotorized Conveyance	A means of transport not equipped with a motor. **	A cart without a motor.
Non-Potentially Hazardous Food (Non-PHF)	This list of NONPOTENTIALLY HAZARDOUS FOODS shall include, but not be limited to, all of the following: (1) Baked goods without cream, custard, or meat fillings, such as breads, biscuits, churros, cookies, pastries, and tortillas. (2) Candy, such as brittle and toffee. (3) Chocolate-covered nonperishable foods, such as nuts and dried fruit. (4) Dried fruit. (5) Dried pasta. (6) Dry baking mixes. (7) Fruit pies, fruit empanadas, and fruit tamales. (8) Granola, cereals, and trail mixes. (9) Herb blends and dried mole paste. (10) Honey and sweet sorghum syrup. (11) Jams, jellies, preserves, and fruit butter that comply with the standard described in Part 150 of Title 21 of the Code of Federal Regulations. (12) Nut mixes and nut butters. (13) Popcorn. (14) Vinegar and mustard. (15) Roasted coffee and dried tea. (16) Waffle cones and pizzelles. *	Food that does not require refrigeration or hot holding to prevent bacterial growth and is unlikely to cause food borne illness. Some examples include, but are not limited to pretzels, churros, pastries, jams, and popcorn.
Overhead Protection	An adequate shielding that goes above all food preparation, food display, warewashing, and food storage areas of the CMFO. This shielding can include: sneezeguards, canopies, food compartments, or umbrellas. *	A shield or cover that goes above all food preparation and food displays areas. This includes sneezeguards, canopies, and food compartments.
Ownership Documents	Records that are required for the Public Health Permit application consisting of: a valid driver's license or I.D., a DMV registration for the vehicle, a commissary contract dated within the past 30 days, and articles of incorporation (if applicable).	Documents of the CMFO operator showing proof of ownership that are used during the Public Health Permit application process.
Plans	Easily readable plans drawn to scale, and specifications to the ENFORCEMENT AGENCY for review. *	Technical drawings of a design with measurements used to build a CMFO cart that the Plan Check Program will need to approve prior to construction.

Potentially Hazardous Food (PHF)	Food that requires time or temperature control to limit pathogenic micro-organism growth or toxin formation. This includes a food of animal origin that is raw or heat-treated, a food of plant origin that is heat-treated or consists of raw seed sprouts, cut melons, cut tomatoes, or mixture of cut tomatoes that are not modified to render them unable to support pathogenic micro-organism growth or toxin formation, and garlic-in-oil mixtures that are not acidified or otherwise modified at a food processing plant in a way that results in mixtures that do not support growth or toxin formation as specified under subdivision (a). *	Food that can cause illness and poses a threat to the public if the food is not stored at the correct temperatures or cooked properly.
Prepackaged	Any properly labeled processed food, prepackaged to prevent any direct human contact with the food product upon distribution from the manufacturer, a food facility, or other approved source. *	Food that is prepared, processed, and packaged from an approved source before being sold to the consumer.
Previously Permitted Carts	A cart that was previously owned and received the Public Health Permit that is needed to operate a CMFO. This type of cart still requires inspection of the cart to see if the new operator's menu can be supported with the cart's equipment.	A cart that was permitted to a previous owner to operate a CMFO in L.A. County.
Public Health Permit	The document issued by the ENFORCEMENT AGENCY that authorizes a person to operate a FOOD FACILITY. *	A document issued by the Department of Public Health/Environmental Health Division granting authorization to a food facility to operate; this document must be renewed annually.
Risk Types	Used to separate the CMFO's into four categories based on the level of potential harm in the foods served to the public. These four categories include: Exempt, Low Risk, Moderate Risk, and High Risk.	The potential harm of food served to the public have been separated into four categories: Exempt, Low Risk, Moderate Risk, and High Risk.
Shared Food Facility Agreement	A document signed by both the Permitted Food Facility and the dependent operator proving that the dependent operator of the CMFO or Mobile Food Facility is sharing an approved food facility for their business.	A document that proves the operator of the CMFO is authorized to use an approved kitchen.
Stand	A small often open-air structure for a small retail business. **	A small structure used for display.
Standard Plan	A preapproved plan for a standardized or mass-produced individual unit intended to serve as a CMFO.	A plan/blueprint that has been preapproved by the Environmental Health Division to construct a specific CMFO cart.
Table	A piece of furniture consisting of a smooth flat slab fixed on legs. **	A flat surface being supported by legs.
Three-Compartment Sink	A sink with three separate compartments used for: rinsing, washing, and sanitizing of utensils. This	One sink with three separate sections to rinse, wash, and sanitize utensils.

	sink is only required when handling open food. Manual ware-washing shall be accomplished by using a three-compartment sink. *	
Unpackaged	Food items that are assembled and served to the customer as part of Limited Food Preparation food operation.	Food that is prepared by the vendor and served to the customer.
Written Attestation Letter	A letter from the manufacturer confirming that the cart was built according to the plans approved by the Environmental Health Division and confirmation from the operator that no alternations were made to the finished cart.	A document that verifies the cart was built per the approved plans.
Written Operational Procedure	A document for food handling and the cleansing and sanitizing of food-contact surfaces and utensils that shall be reviewed and approved by the enforcement agency prior to implementation and an approved copy shall be kept on the mobile food facility during periods of operation. *	A document that is kept on the cart during hours of operation showing operational procedures approved by the Environmental Health Division.

Legend: Each definition that contains an asterisk (*) shows the source from which the definition came from.

California Retail Food Code (Cal Code) *

Merriam-Webster Dictionary **