

**Food Cart
 Plan Review Application**

Cart Name: _____

Social Media Affiliations: _____

Applicant/Owner: _____

Physical Address: _____

Street City State Zip
 Phone: _____ Email: _____

Mailing Address: _____

Street City State Zip

Contact Person: _____ Phone: _____

Fax: _____ Email: _____

Commissary Information is Required

Food Cart is a food and beverage service from non-motorized vehicles that are self-propelled by the operator. Food carts licensed under this category must be certified to NSF Standards. A commissary is required for food storage, water supply, daily disposal of waste and cleaning.

Physical Address of Commissary: _____

City: _____ County: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____

Identify locations of operation:

OFFICE USE ONLY			
Date: _____	Receipt: _____	Amount Received: _____	Received by: _____
Review Start Date: _____	Review Completed: _____	Review Sent by: postal mail	email
Approved by: _____	Issued: _____	TRAKIT Code: _____	

Location of operation:

List all event dates, times & locations where this licensee intends to operate in St. Cloud.

<u>Location</u>	<u>Schedule</u>	<u>Date(s)</u>	<u>Time of Set Up</u>	<u>Time of Operation</u>
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____
_____	/	_____	/	_____

Attach additional sheet if needed

Menu Information:

List ALL food and beverage items (attach sample menu). Describe how items are stored, prepared and served. Attach additional pages if necessary. All food must be prepared on site unless operating from a licensed establishment. No home preparation is allowed.

<u>Menu item:</u>	<u>How item will be stored, prepared & served:</u>
1) _____	/ _____
2) _____	/ _____
3) _____	/ _____
4) _____	/ _____
5) _____	/ _____
6) _____	/ _____
7) _____	/ _____
8) _____	/ _____
9) _____	/ _____
10) _____	/ _____

Attach additional sheet if needed

Potable Water

A food grade hose is required to fill potable water storage tanks. A residential well may not be used as a source of fresh water. A municipal water supply is required.

Type & Size of water heater _____

Source/water supply: _____ Size of water tank: _____

Wastewater

The liquid waste/grey water holding tank must be 15% larger than the fresh water tank. Liquid waste/grey water must be disposed of in an approved manner. Proper disposal is directly into a sanitary sewer or into a waste receptacle provided at the commissary.

Size of wastewater storage tank: _____

If a waste water disposal site is not available at the location of operation where will you be disposing of liquid waste. _____

If currently licensed by MDH, licensure is required with the City of St. Cloud	NO	YES (Provide Copy)
If currently licensed by MDA, licensure is not required with the City of St. Cloud	NO	YES (Provide Copy)

Liability Insurance Requirements:

Must be submitted to the City Clerk prior to issuance of a license.

Applicant operating in the public right-of-way must provide proof of liability insurance with the minimum amounts of \$100,000 for individuals, \$300,000 for any single incident and \$50,000 for property damage.

Construction Requirements:

- Can be found in the City Ordinance 440:40 Subd.3. Construction.
- Minnesota Department of Health Temporary Food Establishment Construction Guide

Operation Limitations/Requirements:

- Food Carts cannot operate in the public right-of-way before 8:00 am or after 2:30 am on any day.
- Food Carts operating in the public right-of-way cannot park, stand or operate at streets/alleys except to cross.
- Food Carts cannot operate in the public right-of-way cannot use lights or noise makers or whistles to attract customers.
- Food Carts must be fixed with a sign no smaller than 12x12 inches which displays the name, address & telephone # of the cart owner.
- NO garbage or food waste including liquids will be dumped or drained onto sidewalks, street, storm drains etc. (licensee is responsible for litter or garbage resulting from business.)

Ensure to Enclose:

- Mechanical schematic of the Food Cart.
- The intended menu.
- The anticipated volume of food to be stored, prepared, and sold.
- The proposed equipment types, manufacturers, model numbers, locations, dimensions, performance capacities, and installation specifications.
- Detailed information on any custom fabricated equipment.
- Detailed information on plumbing, water supply and waste disposal.

Plan review fee

If currently licensed by the MN Department of Agriculture there will be no license issued or fees charged for operation in the City of St. Cloud.

If licensed by the MN Department of Health or not otherwise licensed the plan review fee is **\$138 per cart.** Make checks payable to the City of St. Cloud. Credit card payments accepted at the City Hall cashier's window or via phone with a signed application.

Please contact staff at 320-255-7214 for assistance.

The signature indicates I understand that failure to submit the required information or fees will delay or stop the plan review process. I understand that construction before approval is not approved. I understand that it is my responsibility to submit all required fees and obtain all necessary approvals prior to operation.

Signature	Printed name	Date
Relationship to Applicant:	Owner	Other: _____