Itinerant Vendor

- There is a 3-part application form not included here that must be picked up directly from the Health Department.
REQUIREMENTS FOR
ITINERANT VENDOR LICENSE

Food Vendor which is self contained, on wheels and is mobile.

* Completed application form.

* License fee of $280.00

* Have vehicle inspected by Fire Marshal, if required. If you can stand inside your cart or truck, then Fire Marshal sign off is required. Inspections will be done between 7:00 and 9:00 AM. Call 946-6232 for an appointment. You must bring your driver’s license. Fire Marshal is to sign food service application form where indicated.

* Vendor’s Permit from the Building Department’s Permit and License Center
  200 Orange Street – 5th Floor
  Building Department Staff (203) 946-8388
  Allow two weeks or more to get a Vendor’s Permit.

* Follow Itinerant Vendor Inspection Guidelines on next page to prepare for your Health Department inspection.

* Vehicle is to be inspected and approved by the New Haven Health Department. Monday thru Friday between 9:00 AM and 9:30 AM.
A LICENSE WILL NOT BE ISSUED WITHOUT COMPLETE COMPLIANCE WITH THE FOLLOWING CHECK LIST

____ QFO Certificate: All class 3 vendors must be a Qualified Food Operator as required by the State of Connecticut Public Health Code Section 19-13B-42(S)(4). Any cooked foods other than boiled hot dogs or Georgia hots will classify your operation as a class 3 and will require you to provide a Qualified Food Operators Certificate.

____ Name, Address, and Phone # on truck or cart in 3” letters on both sides. (sign acceptable)

____ Menu Reviewed and Approved.

____ Food contact surfaces of utensils and equipment clean.

____ All surfaces approved, designed, constructed, and maintained.

____ Umbrella provided / overhead cover (no mesh umbrellas.)

____ Hand Wash Setups, Hand Sink Available. For pushcarts moist towelettes with alcohol are acceptable.

____ Thermometers present in all heating/cooling units including ice chest. Provide probe type thermometers for taking temperatures. (Range 0° to 220° refer to handout.)

____ Paper towels available for clean up and hand drying.

____ Labeled Spray Bottle with Bleach and Water Available for Sanitizing (1/2 tsp per bottle of water). Trucks must have bleach bucket with clean wiping clothes. Dipper wells need a bleach soaking solution.

____ Approved Food Containers and Utensils. Utensils must be in excellent condition and capable of being sanitized.

____ Provide adequate and approved facilities to maintain product temperature (Insulated Cooler, Hot Holding Units.)

____ All containers must be labeled.

____ All storage a minimum of 12” off the ground.

____ Trash Receptacle with plastic bags available.

____ Napkins available for public use.

____ Potentially hazardous food meets temperature requirements during storage, preparation, display, service, and transportation. (Hot Foods 140°F or hotter, Cold Foods 45°F or colder.)


____ Food Source and Labeling Approved. No home preparation allowed to be sold in lunch carts. All food must be prepared on site. All containers must be labeled.

____ Proper Storage and use of Toxic Items.

NOTE: Screened pass through windows should be provided on vending trucks. License Displayed in public view.

Approved:  Yes ______     _______________________________     Date

No ______     _______________________________     Date

Date ______  Operator _______________________________
**INSPECTION REPORT**  
**FOOD SERVICE ESTABLISHMENTS**  
**STATE OF CONNECTICUT**  
**DEPARTMENT OF PUBLIC HEALTH**  
410 Capitol Avenue, MS#51FDP, Hartford, CT 06134

**NAME OF ESTABLISHMENT**  
**STREET ADDRESS**  
**OWNER or OPERATOR**  

**ROUTINE INSPECTION**  
**REINSPECTION**  
**PREOPERATIONAL**  
**OTHER**

**ESTABLISHMENT CLASS**  
**TOWN**  
**INSPECTION DATE and TIME**

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**Based on an inspection this day, the items marked below identify the violations in operation or facilities which must be corrected by the date specified below.**

**SOURCES OF FOOD**
- 1 Approved source, wholesome, nonadulterated  
- 2 Original container, properly labeled

**FOOD PROTECTION**
- 3 Potentially hazardous food meets temperature requirements during storage, preparation, display, service, and transportation  
- 4 Adequate facilities to maintain product temperature, thermometers provided  
- 5 Potentially hazardous food properly thawed  
- 6 Unwrapped or potentially hazardous food not stored

**Food protected during storage, preparation, display, service & transportation  
- 7 Food containers stored off floor**

**Handling of food minimized  
- 9 Food dispensing utensils properly stored  
- 10 Toxic items properly stored, labeled, used**

**PERSONNEL**
- 12 Personnel with infection restricted

**CLEANLINESS OF PERSONNEL**
- 13 Handwashing facilities provided, personnel hands washed, clean  
- 14 Clean outer clothes, effective hair restraints  
- 15 Good hygienic practices, smoking restricted

**EQUIPMENT & UTENSILS: DESIGN, CONSTRUCTION & INSTALLATION**
- 16 Food-contact surfaces designed, constructed, maintained, installed, located  
- 17 Nonfood-contact surfaces designed, constructed, maintained, installed, located  
- 18 Single service articles, storage, dispensing  
- 19 No reuse of single service article  
- 20 Dishwashing facilities approved design, adequately constructed, maintained, installed, located

**EQUIPMENT & UTENSILS: CLEANLINESS**
- 21 Preflushed, scraped, soaked and racked  
- 22 Wash water clean, proper temperature  
- 23 Accurate thermometers provided, dish basket, if used  
- 24 Sanitizing rinse (hot water - chemical)  
- 25 Clean wiping clothes  
- 26 Food-contact surfaces of utensils & equipment clean  
- 27 Nonfood-contact surfaces of utensils & equipment clean  
- 28 Equipment/utensils, storage, handling

**WATER SUPPLY**
- 29 Water source adequate, safe  
- 30 Hot and cold water under pressure, provided as required

**SEWAGE DISPOSAL**
- 31 Sewage disposal approved  
- 32 Proper disposal of waste water

**PLUMBING**
- 33 Location, installation, maintenance  
- 34 No cross connection, back siphonage, backflow

**TOILET FACILITIES**
- 35 Adequate, convenient, accessible, designed, installed  
- 36 Toilet rooms enclosed with self-closing door  
- 37 Proper fixtures provided, good repair, clean

**HANDWASHING FACILITIES**
- 38 Suitable hand cleaner and sanitary towels or approved hand drying devices provided, tissue waste receptacles provided

**GARBAGE/RUBBISH STORAGE & DISPOSAL**
- 39 Approved containers, adequate number, covered, rodent proof, clean  
- 40 Storage area/rooms, enclosures - properly constructed, clean  
- 41 Garbage disposed of in an approved manner, at approved frequency

**VERMIN CONTROL**
- 42 Presence of insects/rodents
- 43 Outer openings protected against entrance of insects/rodents

**FLOORS, WALLS & CEILINGS**
- 44 Floors, floor covering installed, constructed as required, good repair, clean  
- 45 Floors, grained, drained as required  
- 46 Floor, wall jutrance covered  
- 47 Mats removable, good repair, clean  
- 48 Exterior walking, driving surfaces, good repair, clean  
- 49 Walls, ceilings attached, equipment properly constructed, good repair, clean  
- 50 Dustless cleaning methods used, cleaning equipment properly stored

**LIGHTING & VENTILATION**
- 51 Adequate lighting provided as required  
- 52 Room free of steam, smoke odors  
- 53 Room & equipment hoods, ducts, vented as required

**DRESSING ROOMS & LOCKERS**
- 54 Rooms adequate, clean, adequate lockers provided, facilities clean

**HOUSEKEEPING**
- 55 Establishment and premises free of litter, no insect/moist harborage, no unnecessary articles  
- 56 Complete separation from living/sleeping quarters and laundry  
- 57 Cleanseated linens stored properly  
- 58 No live birds, turtles, or other animals (except guide dogs)

**NONSIGNING AREAS**
- 59 Seats 75 or more. Non smoking area provided, sign(s) posted at entrance(s), smoking area indicated by sign(s)

**QUALIFIED FOOD OPERATOR**
- 60 Qualified Food Operator  
- 61 Designated alternate  
- 62 Written documentation of training program

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**SIGNATURE OF PERSON IN CHARGE**

**DESCRIPTIVE DEFICIENCIES ON CONTINUATION SHEETS**

**DEMERIT SCORE**

<table>
<thead>
<tr>
<th>TOTAL</th>
<th>RATING</th>
<th>Date Corrections Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>
Bleach is an effective all purpose sanitizer that even kills some bacteria that may cause food poisoning. BLEACH is authorized for use under USDA meat, poultry, rabbit and egg products inspection programs.

ONE TABLESPOON OF BLEACH IN A GALLON OF WATER IS EQUIVALENT TO 200 PPM OF AVAILABLE CHLORINE. ONE TABLESPOON OF BLEACH PER GALLON MEETS THE U.S. PUBLIC HEALTH SERVICE RECOMMENDED LEVEL FOR SURFACE SANITATION.
THERMOMETERS

A metal-stem thermometer must be available and used to check internal food temperatures; thermometers may be purchased from restaurant supply companies or from large department stores. The thermometer must be able to measure from 0° to 220°F.

All refrigerators, cold holding units, and freezers must have an accurate, visible thermometer.
HANDWASHING

THE FOLLOWING ACTIVITIES SHOULD ALWAYS BE FOLLOWED BY THOROUGH HAND WASHING

- Using the restroom
- Using the handkerchief or tissue
- Handling raw food – particularly meat and poultry
- Touching areas of the body, such as ears, mouth, hair, or scratching anywhere on the body
- Touching unclean equipment and work surfaces, soiled clothing, or wash rags
- Smoking or using chewing tobacco
- Clearing away and scraping used dishes and utensils; performing scullery operations
- Eating food or drinking beverages

EVERY ONE OF THESE EVERYDAY ACTIONS CONTAMINATE THE FOOD HANDLERS’ HANDS.