

HEALTH PERMIT APPLICATION MOBILE FOOD FACILITY



This section is to be completed by the applicant, in full – Please print clearly – Do not detach copies – Health permits are NOT transferable and NOT refundable							
TYPE	☐ New Mobile Food Facility (MFF) ☐ Change of Ownership ☐ Update Information Only						
BUSINESS	Name of Business (DBA)		Business F	Business Phone Business Email			
	Commissary Name		Commissary Phone MFF uses Mobile Support Unit (N				
	Commissary Address (include street directions and suite number, if applic					Zip	
	Billing Mailing Address (Must be different than Commissary Address)			City			
OWNER	Type of Ownership (*attach Certificate of LP, LLP Registration, Articles of Incorporation or Organization) ☐ Individual/Sole Proprietorship ☐ Partnership ☐ LP* ☐ Corporation* ☐ LLC*					*	
	Business Owner			Owner E-Mail			
	Owner's Address (cannot be Commissary Address & cannot be a P.O. Box) City State Zip					Zip	
	Driver's License Number(s) (if Sole Proprietorship or Partnership; attach copy of Government Issued ID):			is also owner]Yes □ No	of commissary	Is this MFF be	ing Rented/ Leased ∕es □ No
	Emergency Contact			Emergency Phone			
TERMS	I hereby make an application for a health permit to establish and/or operate the above business, use, or services in accordance with the laws, ordinances, and regulations that are now or may hereinafter be in force pertaining to the above business and I certify that I am the owner or authorized representative of this food business and that all statements are true to the best of my knowledge. I hereby consent to all necessary inspection's incident to the issuance of this permit and operation of the business. I understand that I am required to keep Orange County Environmental Health continuously updated with current route/event stops to assist with inspections during operations. I shall notify the Orange County Environmental Health Division (OCEH) in writing if I transfer ownership, discontinue operation, or have an address change.						
	Failure to do so may result in obligation to pay health services fees and additional penalties. I understand that any construction, alteration, repair, or change from the conditions of approval, including, but not limited to, equipment changes or alterations, a menu change, or change in method of operation, or ownership change, requires review and approval by OCEH. The MFF health permit fee must be paid before plan construction final approval can be granted by this department, or for a change of ownership, or lapse of permit. Payment of your health permit fee does not constitute final plan check approval of your project. Failure to submit the completed application and payment of the annual health permit will impede issuance of the permit or may result in the closure of the facility pursuant to California Health and Safety Code and applicable ordinances and is subject to penalty not to exceed three times the cost of the permit. Upon approval of this application by a representative of OCEH, the health permit certificate must be posted in a conspicuous location. Permits are not transferable and not refundable. Payment may be made in person at 1241 E. Dyer Rd., Suite 120, Santa Ana, CA 92705, Monday – Friday, 8:00 a.m. – 4:00 p.m. or mailed to Orange County Environmental Health, P.O. Box 25400, Santa Ana, CA 92799.						
	Print Name			Title			
	Signature			Date			
DMV	DMV Registered Owner Phone						
	DMV Owner Address			State Zip			
	As the DMV registered owner of this Mobile Food Facility (MFF), I understand that if a Lessee/Renter of this MFF modifies any portion of the MFF from the conditions of original approval, creates repetitive critical risk factor violations relative to any non-compliant equipment of this MFF, or operates beyond the original permit approval, this MFF will need to be brought into full compliance with current codes. If I currently do not lease out this MFF, I understand that a non-compliant MFF must be upgraded to meet current codes prior to leasing out the MFF. Plan submittal is required for all MFF renovations.						
	DMV Registered Owner Signature			Date			
		OFFI	CE USE ON	ILY			
FEE	Billing Type	Fee	Billing Sta	atus	illahle	First Day of O	peration
	Former Owner	Former DBA	Billable non-Billable Former PR		illable	Transfer Date	
SPECIALIST	License Plate #	VIN#			Make	Year	HCD#
	Operational Limitation(s)			Program Identifier			
	FA	PR		TK SR			
	<u> </u>			oval Contingencies Yes No Unenclosed Enclosed CMFO			
	Specialist Name			Date			
ICE	Prior AR	Date of Payment	Amount F	Received		HSO Receipt I	Number
OFFICE	AR Anniversary Date		I		Application Verified By		

Welcome to Orange County! Our goal at Environmental Health is to partner with you in ensuring safe, quality food for your consumers.

To apply for a Health Permit, submit the following documents:

- Completed "Health Permit Application Mobile Food Facility"
 - Please print or type your application.
 - 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."
 - Do not enter information in the section noted "OFFICE USE ONLY."
- Copy of the supporting documentation of the "person" who is legally responsible for the operation of the Mobile Food Facility
 - Sole Proprietor a current driver's license, US government issued identification card, Foreign Consulate Identification Card, or a passport
 - General Partnership a current driver's license, state issued identification card, or Foreign Consulate Identification Card for each owner
 - o Limited Partnership (LP) Certificate of Limited Partnership
 - Limited Liability Partnership (LLP) Limited Liability Partnership (LLP) Registration
 - o Corporation Articles of Incorporation, including a list of the officers' names and titles
 - o Limited Liability Company (LLC) Articles of Organization
- Copy of the supporting documentation for the "vehicle operation"
 - Approved commissary letter
 - Mobile Food Facility Route Stops form
 - Department of Motor Vehicles (DMV) registration of the vehicle (e.g. not required for push carts)
 - o Restroom Agreement form, as needed (for route stops longer than one hour)
 - Seller's Permit
 - Business License, if applicable

If the food vehicle is new to Orange County, or if there is a lapse in permit, or if there has been a change in ownership, equipment, menu or operation, MFF plan submission may be required to verify that the vehicle meets California Health and Safety Code requirements. To determine if plans are required, please contact Environmental Health at (714) 433-6416. Prior to being issued a Health Permit, an inspection will be conducted to determine that the proposed Mobile Food Facility and its method of operation meets the requirements of the California Health and Safety Code and applicable ordinances. No food operations are allowed on the vehicle until a valid MFF health permit is issued.

The permit fee is based on the date of ownership change or start of operations in Orange County. Annual permit renewals (payment of fees, pass inspection, update application and information) are the responsibility of the permittee. The renewal process consists of the permit holder paying the annual health permit fees and completing the required number office field health inspections each year. If the fees are not paid and/or the inspections are not conducted, the MFF permit will be considered lapsed and the vehicle may need to go through plan review to verify it meets Health and Safety Code requirements.

Each approved Mobile Food Facility shall receive an inspection decal for the current year which is affixed to the MFF and a health permit certificate. Once a permit is issued, the owner will be automatically billed until the owner provides this agency written notification that the business has sold, stopped operations in Orange County, or that the ownership has changed.

Acceptable forms of payment are cash, check, credit card, or money order. Make checks payable to the County of Orange, and place your Related ID number on the check. Health permit fees are nonrefundable. You may pay in person from 8:00 a.m. to 4:00 p.m. Monday through Friday (excluding County holidays) at 1241 E. Dyer Rd., Suite 120, Santa Ana, CA 92705, or mail your check to Orange County Environmental Health, P.O. Box 25400, Santa Ana, CA 92799.

A permit, once issued, is nontransferable. A permit is valid only for the vehicle and permittee, menu, type of food sales and operations, or distribution activity, and unless suspended or revoked for cause, for the time period indicated. The food vehicle permit is valid throughout Orange County as long as the vehicle operation complies with applicable local, state, and federal statues, regulations, ordinances, and requirements. To learn more about the Mobile Food Facility Program, please visit www.ocfoodinfo.com/mobile

For more information, please contact the Mobile Food Facility information phone line at (714) 433-6416.