MOBILE FOOD SERVICE FACILITY LICENSE- NEW

TODAY’S DATE

Applicant name (Facility/Licensee)

[ ] APPLICATION
[ ] WORKER’S COMPENSATION NAME AND/OR POLICY NUMBER
[ ] COPY OF VEHICLE REGISTRATION
  [ ] VERIFY MOBILE TAG # WITH VEHICLE REGISTRATION ON APPLICATION (by office staff)
[ ] COPY OF CERTIFIED FOOD MANAGERS CARD- if applicable
[ ] COPY OF FOOD ALLERGEN TRAINING CERTIFICATE- if applicable
[ ] COMMISSARY OR BASE OF OPERATION AUTHORIZATION FORM
  [ ] A COPY OF THE FOOD SERVICE FACILITY LIC OF COMMISSARY OR BASE OF OPERATION
[ ] PLAN REVIEW PACKET AND FEE $55
[ ] COPY OF FULL MENU
[ ] HACCP- if applicable
[ ] COMPLETE FLOOR PLAN OF THE UNIT DRAWN TO SCALE
[ ] PICTURES/ FACTSHEET OF ALL EQUIPMENT NECESSARY FOR THE OPERATION OF UNIT
[ ] PROVIDE PLUMBING SPECIFICATION OF ALL EQUIPMENT
[ ] COPY OF THE RECEIPT FOR THE VENDORS LICENSE (OBTAINED @ DPS 2425 REEDIE DR, 7TH FLOOR OR CITY OF GAITHERSBURG OR ROCKVILLE OR
[ ] OPERATING AT SPECIAL EVENTS ONLY (ex: County fairs, private parties, etc.)

Staff Initial: _____
MOBILE FOOD SERVICE FACILITY GENERAL REQUIREMENTS

FOOD FOR A MOBILE FOOD SERVICE FACILITY MAY NOT BE PREPARED OR STORED IN A PRIVATE HOME.

1. A mobile food facility must operate from an approved base of operation and report at least daily to the base for cleaning and servicing of the unit. A valid copy of the license from the base of operation, if located outside of Montgomery County, is required.

2. An original letter (on letterhead) from the approved base of operation must be submitted with the application. This letter will indicate approval of its facility use as the mobile unit’s base of operation.

3. A mobile food facility must have all required equipment (hand sinks, utensil washing sinks, refrigerators, facilities to store equipment and supplies, etc.) located/contained within the unit.

4. Purchase all raw ingredients or prepared foods from a licensed commercial source (such as a commissary, wholesaler or retail food facility). No food from an unapproved source may be served or sold. Any food not prepared on the mobile unit must be prepared in a licensed kitchen located at the base of operation.

5. All equipment must meet the standards of the National Sanitation Foundation (NSF). Refer to COMAR 10.15.03 governing Food Service Facilities for specific information on these standards.

6. Maintain cold food at 41°F or below and frozen food at 0°F or below in approved equipment until cooked or served. Use of coolers with ice for storing potentially hazardous food is not allowed.

7. Cook food to the proper minimum internal temperature:
   a. fruits and vegetables cooked for hot holding - 135°F;
   b. seafood, meat not otherwise specified, and shell eggs for immediate service - 145°F;
   c. ground pork, ground beef, and eggs not for immediate service - 155°F; and,
   d. poultry, stuffed meats, and stuffed pasta - 165°F.

8. Rapidly reheat previously cooked food purchased from a licensed facility to a minimum of 165°F within 2 hours, using approved equipment. Do not use hot holding equipment such as steam tables, chafing dishes, or crock pots to reheat food. If food is cooked in advance at a licensed facility for cold transport, cool the food from 135°F to 70°F within 2 hours and from 70°F to 41°F within 4 hours.

9. Maintain hot food at 135°F or above. Pre-heat hot holding units before use.

10. Eliminate bare hand contact with ready-to-eat food by wearing disposable gloves or using foil, wax paper or clean and sanitized utensils. Wash hands before putting on the gloves. Change plastic gloves between tasks or when torn or soiled.

11. Only use ice from an approved potable water source and keep it separated from raw animal foods. Provide scoops or utensils with handles to properly dispense ice.

12. Store raw products below and away from ready-to-eat foods. Store all food, equipment, and supplies off the floor and away from chemicals.
13. Provide a metal stem probe thermometer with minimum 2°F increments for monitoring food temperatures. To check ambient temperatures, provide thermometers with minimum 2°F increments in all cold and hot food storage units.

14. All water must come from an approved potable source. A clean and sanitized holding tank that is adequately sized for the intended use must be provided to store the water.

15. Provide a hand sink with hot (minimum temperature of 100°F) and cold running water. Water must be dispensed through a faucet. Provide soap and paper towels at the hand sink at all times. Wash hands after coughing or sneezing, using the restroom facilities, smoking, eating, handling raw animal foods, or after engaging in activities that could contaminate your hands.

16. Provide a three compartment sink with integral drainboards for utensil washing. Each vat must be large enough to fit the largest piece of equipment to be washed on the mobile unit. Using containers such as bus or hotel pans is not allowed in lieu of providing a commercial three compartment sink. Provide dishwash detergent and an approved sanitizer for proper washing, rinsing, and sanitizing of equipment. Provide appropriate test papers to check the sanitizer concentration.

17. Dispose of all waste water into a holding tank that is leak proof and provided with a drain plug. A waste water tank that is larger than the size of the water supply tank is required. Drain the waste water into an approved sanitary sewer system (not into a storm sewer or onto the ground).

18. Equipment used for cooking foods that may produce grease or steam must be adequately vented outside the mobile unit. Grease or steam may not be allowed to accumulate within the unit.

19. Provide floors and walls (if appropriate) that are light in color, cleanable, durable, and non-absorbent. Screen or seal all outer openings to prevent the entrance of vermin. Maintain the interior of a mobile food facility in a clean and sanitary condition.

20. Provide a minimum of 50 foot candles of shielded light inside the mobile food facility.

21. No person who has a communicable disease, infected wound or boil, or is experiencing diarrhea, vomiting, or persistent coughing or sneezing is allowed to work on a mobile food facility. All staff must wear clean clothing, hair restraints, and no jewelry except a smooth wedding band. Employee drinks are permitted provided the containers have a lid with a straw to prevent mouth-to-hand contamination. Smoking and the use of other tobacco products are prohibited in the mobile food facility.

22. Provide an adequate number of covered trash containers. Dispose of grease into an approved receptacle (such as a grease barrel or WSSC approved disposal site).

23. Only items related to the operation of the mobile food facility are allowed in the unit.

24. Foods that are not commercially processed and served in their original, unopened container must have no more than 0.5 grams of artificial trans fat per serving (ingredients list indicates "partially hydrogenated" oil).

25. All mobile food service facilities that prepare or serve potentially hazardous foods or opened/unpackaged foods must complete and submit a HACCP plan.

26. A certified food service manager may be required for any mobile food service facility at the discretion of the Director.

27. Mobile units must operate independently and remain capable of being mobile at all times. Electrical, water or sewer connections to exterior facilities are not permitted.

28. No tables or chairs shall be placed outside of a mobile unit for customer sit down dining.

PLEASE KEEP THIS DOCUMENT FOR REFERENCE
MOBILE FOOD SERVICE FACILITY LICENSE APPLICATION
(UNITS OPERATING AT A SITE SPECIFIC LOCATION MUST MOVE FROM LOCATION DAILY)

TODAY’S DATE: ______________________

One Year License: New[ ] Renewal[ ] Reciprocity[ ]  Seasonal 90 Day License: New[ ] Renewal[ ]

Name of Facility: __________________________________________

Trailer: [ ] Motor Vehicle: [ ] Cart: [ ] Food Sold: Pre-Packaged Only[ ] Open or Potentially Hazardous[ ]

Mobile Tag No.: ________________  State: _____  VIN: __________________________

Owner/Corporation Name: ___________________________________  Federal Tax ID: __________________________

Telephone No.: ____________________  Email: __________________________________

Address of Owner/Corporation: __________________________________________________________

Months of Operation: ________________  Working Hours and Days Open for Business: ________________

Workers’ Compensation Insurance Company Name: __________________________  Policy/Binder No.: ________________

Check here [ ] if sole proprietor. The business is a sole proprietorship with no employees, Members of a partnership, or LLC must apply for a Certificate of Compliance from the Worker’s Compensation Commission (410-864-5100 or 800-492-0479).

If you do not have Worker’s Compensation Insurance, you must submit a copy of the Certificate of Compliance issued by the Worker’s Compensation Commission (410-864-5100 or 800-492-0479).

When requesting a Mobile Reciprocity License, the following documentation must be attached to this application:

• Your Maryland “County of Origin” Mobile Food License and Inspection Report;
• Menu and Stamped Approved HACCP Plan;
• Commissary or Base of Operation Authorization Form and copy of Commissary or Base of Operation Food Service Facility License;
• Montgomery County Certified Food Manager Card and Food Allergen Training Certificate (if applicable);
• Copy of Vehicle Registration;
• Copy of vendors license payment receipt (obtained from Department of Permitting Services @2425 Reedie Drive, 7th Floor or City of Gaithersburg/Rockville).

I hereby certify that the above information and attachments is accurate and complete:

_________________________  __________________________
Signature of Owner or Agent  Printed Name

LICENSES ARE NOT TRANSFERABLE FROM PERSON TO PERSON.

OFFICE USE ONLY:

Receipt No.: __________________________  Date Received: ______________  Staff Initial: _________

Check/Money Order/Visa/MC.: ______________  Plan review Fee: __________  Application Fee: __________
Payment Method: Check ☐ Money Order ☐ Visa ☐ Mastercard ☐
Make checks or money orders payable to "Montgomery County, Maryland". Cash is not accepted.

Fee: $ __________ Credit Card No: ___________________________ Exp. Date: __________
Credit Cardholder’s Name: ____________________________________ 3 Digit Security Code: ______

I agree to pay the indicated total amount according to card issuer agreement:
Cardholder’s Signature: ______________________________________

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FEE SCHEDULE

<table>
<thead>
<tr>
<th>Type of License</th>
<th>Fee</th>
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<tbody>
<tr>
<td>(A) Low Priority (Facilities that serve commercially packaged potentially hazardous foods directly to the consumer or non-potentially hazardous foods that is cut, assembled, or packaged on the premises, such as candy, popcorn, and baked goods; or hand dipped ice cream)</td>
<td>$200.00</td>
</tr>
<tr>
<td>(B) Moderate Priority (Facilities that serve potentially hazardous food that is prepared requiring the food to pass through the temperature danger zone, 41° F to 135° F, one time before service such as cooking, hot holding, and then serving; or facilities that cut, assemble, or package on the premises, such as meats)</td>
<td>$375.00</td>
</tr>
<tr>
<td>(C) High Priority (Facilities that serve potentially hazardous food that is prepared a day or more in advance of service; or using food preparation methods that require the food to pass through the temperature danger zone, 41° F to 135° F, two of more times before service, such as cooking, cooling, and then reheating)</td>
<td>$525.00</td>
</tr>
<tr>
<td>(F) Mobile Facilities, Event Series, or Seasonal or Pool Snack Bars operating for more than 14 days but less than 90 days with operating dates printed on the licenses:</td>
<td>$175.00</td>
</tr>
<tr>
<td>Mobile Reciprocity License</td>
<td>$300.00</td>
</tr>
<tr>
<td>Plan Review (one time)</td>
<td>$55.00</td>
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</tbody>
</table>
Commissary or Base of Operation Authorization Form

This serves to notify Montgomery County, Maryland that:

I, __________________________ (owner/agent) of the food facility noted below, will allow my facility to serve as a commissary for the mobile food establishment noted below. I understand that as a commissary for the mobile food establishment, I must allow the mobile food establishment to return for servicing daily. I understand that by signing this form my facility will be inspected to ensure the requirements are met.

Attach a copy of the Food Service Facility License to this application.

<table>
<thead>
<tr>
<th>Name of Commissary or Base of Operation</th>
<th>Address of Commissary or Base of Operation</th>
<th>Name of Owner/Licensee</th>
<th>Days/Hours of Operation</th>
<th>Day Phone</th>
<th>E-mail Address</th>
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<tr>
<th>Water Supply</th>
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<th>Sewage Disposal</th>
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<tbody>
<tr>
<td>__Public</td>
<td>___Private</td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Mobile Food Establishment</th>
<th>Name of Mobile Food Establishment Owner/Corporation</th>
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<tbody>
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The following services are provided for the Mobile Food Establishment by my food facility serving as commissary.

Note: If you answer ‘No’ to any of the below please explain.

1. Adequate space for storage for food, utensils, and other supplies. Storage area shall be separated from the commissary’s food, utensils, and other items. Storage areas for the mobile establishment will be clearly marked. ( ) Yes ( ) No 5. A food preparation area for mobile food establishment that conducts food preparation. Food preparation area shall be separated from that of commissary or preparation will be completed at alternate time of day. If Yes, describe. ( ) Yes ( ) No

2. Potable (drinking) water for filling water tanks. ( ) Yes ( ) No 6. Sanitary disposal of waste water and grease. ( ) Yes ( ) No

3. A three compartment sink for sanitizing utensils. ( ) Yes ( ) No 7. Disposal of garbage and refuse. ( ) Yes ( ) No

4. Hot and cold potable water under pressure for cleaning. ( ) Yes ( ) No 8. Storage of vehicle/cart. ( ) Yes ( ) No

Signature of Commissary Owner or Agent Printed Name Date

I, __________________________ (owner/agent) of the mobile food establishment noted above agree to use this food facility as a commissary for servicing daily. I will use the commissary for the requirements noted above. If I do not use the commissary, my Montgomery County Mobile Food Service License may be revoked, and I must stop operating until I obtain another commissary and provide a new commissary authorization document to the Montgomery County Department of Health and Human Services.

Signature of Mobile Food Establishment Owner or Agent Printed Name Date
MOBILE FOOD ESTABLISHMENT PLAN REVIEW PACKET
($55.00)

Maryland Health-General Code Annotated, §21-321 and Annotated Code of Maryland (COMAR) 10.15.03.33, requires that properly prepared plans be submitted and approved, before a person constructs a food establishment, remodels or alters a food establishment, or converts or remodels an existing building for use as a food establishment. A plan review is required to:

➢ Ensure food establishments are built or renovated according to current rules and regulations;
➢ Enhance food safety and sanitation by promoting efficient layout and flow of food based on the menu and food preparation processes; and
➢ Help prevent code violations by addressing potential layout and design issues prior to construction.

This Mobile Food Establishment Plan Review Application Packet is intended to help you through the plan review process and to ensure that your mobile unit or pushcart meets the requirements of COMAR 10.15.03.25 Special Food Service Facilities. This document should be completed as part of the plan review process and subsequent food service permit issuance. The plan review helps to avoid future problems. By listing and locating equipment on floor plans and diagramming specifications for electrical, mechanical and plumbing systems, potential problems can be spotted while still on paper and modifications made BEFORE costly purchases, installation and construction.

This packet consists of the following information:
- Mobile Food Establishment Plan Review Worksheet
- Commissary or Base of Operations Authorization Form

Please complete the attached documents and submit with the required plan review application and fees to the Montgomery County Department of Health and Human Services. Approval must be obtained prior to construction or purchasing a unit.
MOBILE FOOD SERVICE FACILITY LICENSE

The following must be submitted at a minimum of fourteen (14) business days prior to operation with your completed application and fees to expedite review and approval or your permit request:

1. Application
2. Copy of Vehicle Registration.
3. Certified Food Managers Card and Food Allergen Training Certificate;
4. Dates of operation and location where you will be operating;
5. Information relating to your base of operation, including approximate dates of use;
6. Letter of agreement for proposed Commissary Base of Operation that is signed by owner of facility (Base of Operations Authorization Form). Potable (drinking) water and wastewater disposal is required for all mobile food establishments unless your unit is serving only prepackaged foods and bottled/canned drinks. Note: Montgomery County will evaluate the proposed fill and dump site to ensure the design of the septic system can handle the proposed volume and strength of the wastewater from your pushcart or mobile unit. This will be based on your menu and an evaluation of the potential daily volume of wastewater.
7. A copy of the Food Service Facility License of commissary or base of operation;
8. Copy of vendors license/ proof of payment (obtained @DPS 2425 Reedie Drive 7th floor or City of Gaithersburg or Rockville)
9. Mobile Food Establishment Plan Review Packet (for new truck only)
10. Full menu—Note: the available equipment may dictate restrictions on the type of food prepared.
11. HACCP Plan detailing food procedures (every 5 years);
12. Complete floor plans of the unit drawn to scale, including placement of all equipment;
13. List of all equipment necessary for the operation of the unit i.e. Cut sheets, manufacturer’s specifications or photos of the unit and all equipment. Note: All equipment must meet the requirements of COMAR 10.15.03.15;
14. Provide plumbing specification of all equipment including ware washing sinks;
15. A description of the construction materials used on the unit, including surface finishes for floors, walls, ceilings, lighting, and countertops (as applicable);

Applicant is responsible for obtaining any required approvals from other agencies, such as zoning/planning, business license, building, city or county authorities, and the Motor Vehicle Administration registration/license as applicable.
# Mobile Food Establishment Plan Review Worksheet

Mobile food establishments must comply with the applicable requirements in the Maryland Food Regulations. These regulations may be obtained at: [http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=10.15.03](http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=10.15.03)

Applicant is responsible for obtaining any required approvals from other agencies, such as zoning/planning, business license, building, city or county authorities, and the Motor Vehicle Administration registration/license as applicable.

Please complete the questions on this worksheet in their entirety that apply to your type of mobile food establishment. Be as specific as possible. Incomplete responses will delay the review process.

Date: ____________________________

Mobile Food Establishment Type:  
- [ ] Trailer:   
- [ ] Motor Vehicle:  
- [ ] Pushcart:  

Food Sold:  
- [ ] Pre-Packaged Only:   
- [ ] Open or Potentially Hazardous:  

Is Unit:  
- [ ] New  
- [ ] Remodeled

Requesting Reciprocity:  
- [ ] Yes  
- [ ] No

Name of Facility: ____________________________________________

Owner/Corporation Name: ________________________________________

Address of Owner/Corporation: ____________________________________

Owner/Corporation Phone: __________________      Cell Phone: _______________________

Owner/Corporation E-mail: ________________________________________

Projected Food Operation Start Date: ________________________________

Months of Operation (i.e. May – Sept.): ______________________________

Signature of Owner or Agent                            Printed Name            Date

OFFICE USE ONLY:

Receipt No.: ____________________________ Date Received: ______________ Staff Initial: _____

Check/Money Order/Visa/MC.: ____________________________ Application Fee: **$55.00**
Payment Method:  Check □  Money Order □  Visa □  Mastercard □
Make checks or money orders payable to “Montgomery County, Maryland”. Cash is not accepted.

Fee:  $55.00  Credit Card No: __________________________________________________________
Exp. Date: ______________  3 Digit Security Code: ________
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I agree to pay the indicated total amount according to card issuer agreement:
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<tr>
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<td>*Plan Review (one time)</td>
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NOTE: If proposed commissary or base of operations is on private well and septic system, obtain written well and septic approval for use from the Montgomery County Department of Permitting Services (DPS), Division of Well and Septic. DPS will evaluate the proposed commissary or base of operation dump site to ensure the design of the septic system can handle the proposed volume and strength of the wastewater from your unit. This will be based on your menu and an evaluation of the potential daily volume of wastewater generated. Additionally, if on a private well, a potable water test result must be submitted with this application.

1. What is the source of potable (drinking) water for use on the unit? Describe methods of filling and refilling potable (drinking) water tanks. Note: If the water is from a private source, water sample results must be submitted for approval.

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

2. What is the size of the potable (drinking) water storage tank?

_______________________________________________________________________________________

3. Is a potable (drinking) water food grade water hose available for filling potable (drinking) water tank?
   ☐ Yes       ☐ No
   If Yes, where will this hose be stored?

_______________________________________________________________________________________

4. How will your water supply hose, water pipes and water storage tank(s) be disinfected? Describe the method and frequency of disinfection.

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

5. How will wastewater be removed from the unit? Describe how wastewater will be transported from the unit to the approved wastewater disposal location.

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

6. What is the size of your wastewater storage tank? Note: The wastewater tank must be sized larger than potable water tank.

_______________________________________________________________________________________

7. Obtain written agreement, signed by owner, of the proposed commissary for discharging liquid or solid wastes (see Commissary or Base of Operations Authorization Form).
8. List all menu items (including all beverages and condiments), attach a menu if needed. Additionally, provide a Hazard Analysis Critical Control Point Plan (HACCP).

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

9. List sources for all foods. All food items must come from approved sources.

_____________________________________________________________________________________
_____________________________________________________________________________________

10. How will you prevent cross contamination of equipment and between raw and ready to eat (RTE) foods during operation with the limited space available on the Mobile Food Unit?

_____________________________________________________________________________________
_____________________________________________________________________________________

11. Identify where all food items will be prepared (including foods requiring advance preparation).

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

12. Describe how foods will be transported to and from the unit.

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

13. Indicate construction materials (quarry tile, stainless steel, plastic covered wall board, linoleum, etc.) that will be used in the unit in the following areas (as applicable):

<table>
<thead>
<tr>
<th>Floor</th>
<th>Walls</th>
<th>Ceiling</th>
<th>Countertops</th>
</tr>
</thead>
<tbody>
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</table>

15. Provide complete plans of the unit drawn to scale, including placement of all equipment.
16. List all equipment on unit (i.e. refrigerators, freezers, grills, stoves, fryers, etc.) Provide cut sheets, manufacturer’s specifications or photos of the unit and all equipment.

_______________________________________________________________________________________

_______________________________________________________________________________________

17. What is the power source for the mobile unit? Mobile units must operate independently and remain capable of being mobile at all times.

_______________________________________________________________________________________

_______________________________________________________________________________________

18. How will the water for handwashing achieve and be maintained at a minimum of 100°F on the unit?

_______________________________________________________________________________________

_______________________________________________________________________________________

NOTE: ALL HANDSINKS MUST BE SUPPLIED WITH HAND SOAP, PAPER TOWELS, AND A WASTE RECEPTACLE AT ALL TIMES.

19. Describe methods of preventing no bare hand contact of ready-to eat foods (i.e. utensils, gloves, etc.).

_______________________________________________________________________________________

_______________________________________________________________________________________

20. Describe ware washing procedures. How and where will dishes and utensils be washed, rinsed, and sanitized?

_______________________________________________________________________________________

_______________________________________________________________________________________

21. What type of chemical sanitizer will be used? At what concentration? Proper test strips must be available.
   Type: ______________________  Concentration: _____________________

22. Describe how garbage will be stored and where it will be disposed. Additionally, if applicable, describe where cooking grease will be stored and disposed.

_______________________________________________________________________________________

_______________________________________________________________________________________
23. What method(s) of insect and rodent control will be used in your unit? Please note that all pesticide application must be conducted in accordance with Maryland Department of Agriculture - COMAR 15.05.01 – Pesticide Use Control.

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________  

24. For push carts, describe the type of overhead protection provided for the unit (i.e. awnings, umbrellas).
_____________________________________________________________________________________  
_____________________________________________________________________________________
_____________________________________________________________________________________ 

25. Describe how the mobile unit will be cleaned. Where? How? Frequency?

_____________________________________________________________________________________
_____________________________________________________________________________________  
_____________________________________________________________________________________ 

26. No person who has a communicable disease, infected wound or boil, or is experiencing diarrhea, vomiting, or persistent coughing or sneezing is allowed to work on a mobile unit.

I hereby certify that the above information is accurate and complete. Any person with the symptoms identified under question #26 above will be omitted from work:

__________________________________________  ____________________________  ______________________
Signature of Owner or Agent                  Printed Name                        Date

**NOTE: MOBILE FOOD SERVICE FACILITY LICENSE WILL NOT BE ISSUED UNTIL THE FINAL PLAN REVIEW INSPECTION IS CONDUCTED AND APPROVAL GRANTED BY THIS DEPARTMENT.**
Guidelines for Submitting a Hazard Analysis Critical Control Point (HACCP) Plan

Health-General Article, §21-321, Annotated Code of Maryland, and the Code of Maryland Regulations (COMAR) 10.15.03 Food Service Facilities require that plans and specifications be submitted to the Department when a person proposes to construct, remodel or alter a food establishment, or convert or remodel an existing building for use as a food establishment. Plans and specifications for the building and equipment, and information regarding the foods to be prepared, processed, or manufactured are required. This information will be used to classify the facility as high, moderate, or low priority. Definitions of priority assessment levels are found in COMAR 10.15.03.33C.

A HACCP plan is required for all high or moderate priority facilities. Facilities which serve only hand dipped ice cream or commercially packaged potentially hazardous foods do not require a HACCP plan. The following information is intended to assist you in providing the necessary information for both priority assessment and HACCP plan development.

Contents

A. Priority Assessment Information
B. General food Handling Information and Procedures
C. HACCP Plan Required Contents
D. Model HACCP Format
A. **Priority Assessment Information**

1. Menu or foods – Provide a copy of the menu or a written description of the foods to be prepared and served.
2. Food service system – Specify the food preparation and service systems you will use, i.e. cook-serve, cook-chill-reheat-hot hold-serve, cold hold-serve.
3. Population served – Specify whether you serve food in a health care facility, as defined in COMAR 10.15.03.02B(38).

B. **General Food Handling Information and Procedures (only required for facilities classified as “high” or “moderate”):**

1. Describe how you will ensure that all foods are obtained from approved sources.
2. Specify how cross-contamination from raw to cooked or ready-to-eat foods will be prevented.
3. Indicated how frozen potentially hazardous foods will be thawed.
4. Indicate how potentially hazardous food will be cooled, i.e. ice baths, shallow pans, rapid chill.
5. Specify whether any prepared foods are distributed off-premises.
6. Specify whether any refrigerated foods are received which require storage temperatures below 41°F, i.e. pasteurized crab meat at 38°F.
7. Indicate whether reduced oxygen packaging of food, as defined in COMAR 10.15.03.02B(63), will be conducted onsite.
8. Include specific information for any processes or procedures which incorporate:
   - “Time-only” control (see COMAR 10.15.03.08),
   - Serving raw or undercooked animal foods (see COMAR 10.15.03.10 C, D &F).
   - Acidification of ready to serve food products.

C. **HACCP Plan Required Contents**

The plan must include:

1. Identification of Critical Control Points (CCP). CCPs generally include cooking, cooling, reheating, cold holding, and hot holding, but other steps may be included if needed for a specific food. Note that cold food preparation, like chopping, mixing and slicing, is not a CCP step. Hazards are controlled during those processes by following Good Retail Practices (GRPs), sometimes referred to as Standard Operating Practices (SOPs).
2. Critical limits for each CCP.
3. Monitoring procedures for each CCP.
4. The corrective action that will be taken if there is a loss of control at a CCP due to such factors as employee error, equipment malfunction, or power failure.
5. Verification procedures that will ensure proper monitoring of each CCP such as calibration of cooking and holding equipment and thermometers, and maintenance and review of records such as temperature logs. Using logs for record keeping is strongly encouraged, but not required, as long as the facility can demonstrate that temperatures are routinely monitored, as described in the HACCP plan, and that specified corrective actions are taken when critical limits are not met.
6. A list of equipment used to support the proposed food service systems and maintain control at each CCP.
7. Written procedures for employee training on HACCP procedures (see attached example).
D. processes

PROCESS 1

Food items do not go through a cook step. For example: commercially prepared ready-to-eat foods, cold cut deli sandwiches, salads in which ingredients are not pre-cooked, cut melons and sprouts.

Menu items prepared under Process 1: ________________________________________________________________

<table>
<thead>
<tr>
<th>Control Point/ Critical Control Point</th>
<th>Critical Limit</th>
<th>Monitoring Procedures</th>
<th>Corrective Actions</th>
<th>Verification</th>
<th>Equipment Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receiving and Storage</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Processing (Washing, Cutting, Assembling)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cold Holding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**PROCESS 2**

Food items prepared for same day service with no reuse of leftovers. For example: cooked fast-food meals, soups, rice, and other cooked foods where leftovers are not saved. **NO COOLING** of foods for ingredients in other dishes.

Menu items prepared under Process 2: ________________________________________________________________

<table>
<thead>
<tr>
<th>Control Point/ Critical Control Point</th>
<th>Critical Limit</th>
<th>Monitoring Procedures</th>
<th>Corrective Actions</th>
<th>Verification</th>
<th>Equipment Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receiving and Storage</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cold Holding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooking</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hot Holding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PROCESS 3

Complex Preparation. Food items cooked and cooled, then possibly reheated. Food items travel through the temperature danger zone more than one time. Includes soups, salads, sauces, and meats that are cooled and **REHEATED**.

Menu items prepared under Process 3: ____________________________________________________________

<table>
<thead>
<tr>
<th>Control Point/ Critical Control Point</th>
<th>Critical Limit</th>
<th>Monitoring Procedures</th>
<th>Corrective Actions</th>
<th>Verification</th>
<th>Equipment Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receiving and Storage</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cold Holding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooking</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hot Holding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reheating</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
WRITTEN PROCEDURES FOR EMPLOYEE HACCP TRAINING  
(SAMPLE)

All employees will be trained to use the approved HACCP plan prior to beginning employment and periodically after that. Training will include identification of the processes that are critical control points, how these processes will be monitored and what corrective actions must be taken if critical controls are violated. The approved HACCP plan will be available in the food preparation area at all times.

Food temperature logs* will be used to monitor product temperatures during the preparation process. These completed logs will be maintained in the food preparation area, and held for review by management, as part of the HACCP monitoring system.

Training in basic sanitation will include hand washing procedures and methods for cleaning and sanitizing utensils, equipment, and food preparation surfaces. All employees will be trained to use and calibrate a metal stem thermometer, and will be required to check and recalibrate thermometers weekly.

*Note – Use of logs for record keeping is strongly encouraged, but not required, as long as the facility can demonstrate that temperatures are routinely monitored, as described in the HACCP plan, and that specified corrective actions are taken when critical limits are not met.
<table>
<thead>
<tr>
<th>FOOD</th>
<th>MINIMUM INTERNAL TEMPERATURE</th>
<th>HOLDING TIME AT SPECIFIED TEMPERATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>°F</td>
<td>°C</td>
</tr>
<tr>
<td>Shell eggs. Fish, meat, and all other potentially hazardous foods not specified in Chart 1.</td>
<td>145</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>150</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>155</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>158</td>
<td>70</td>
</tr>
<tr>
<td>Shell eggs not prepared for immediate service, ratites, comminuted fish and meats, game animals commercially raised for food, and injected meats.</td>
<td>145</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>150</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>155</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>158</td>
<td>70</td>
</tr>
<tr>
<td>Whole roasts (beef, corned beef, pork and cured pork roasts such as ham). Holding time may include post oven heat rise. Minimum oven temperature for roasts greater than 10 pounds is 250°F for dry heat. For roasts less than 10 pounds, minimum oven temperatures are 350°F for dry heat and 325°F for convection ovens. Oven temperature may be 250°F or less for high humidity cooking (relative humidity greater that 90 percent for at least 1 hour or in a moisture impermeable bag that provides 100 percent humidity).</td>
<td>130</td>
<td>54.4</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>131</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>133</td>
<td>56.1</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>135</td>
<td>57.2</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>136</td>
<td>57.8</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>138</td>
<td>58.9</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>140</td>
<td>60</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>142</td>
<td>61.1</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>144</td>
<td>62.2</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>145</td>
<td>62.8</td>
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<tr>
<td></td>
<td>or</td>
<td></td>
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<tr>
<td></td>
<td>147</td>
<td>63.9</td>
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<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>151</td>
<td>66.1</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>155</td>
<td>68.3</td>
</tr>
<tr>
<td></td>
<td>or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>158</td>
<td>70</td>
</tr>
<tr>
<td>Poultry; stuffed meat, pasta, or poultry, and exotic bird species; wild game animals; and stuffing containing fish, meat, or poultry. Reheat of leftovers for hot holding.</td>
<td>165</td>
<td>74</td>
</tr>
<tr>
<td>Raw foods of animal origin cooked in a microwave oven.</td>
<td>165</td>
<td>74</td>
</tr>
<tr>
<td>Fruits and vegetables and ready-to-eat commercially processed foods cooked for hot holding.</td>
<td>135</td>
<td>57</td>
</tr>
<tr>
<td>Ready-to-eat commercially processed foods for immediate service.</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>
## HACCP CHART

<table>
<thead>
<tr>
<th>STEP</th>
<th>CRITICAL LIMIT</th>
<th>MONITORING PROCEDURE</th>
<th>SAMPLE CORRECTIVE ACTIONS</th>
<th>VERIFICATION</th>
</tr>
</thead>
</table>
| **RECEIVE** | ● Approved source  
● Free from spoilage  
● Proper temperature  
● Egg and shellfish receipts  
● Packaging intact (i.e., not torn or damaged) | ● Inspect food  
● Measure and document food temperature  
● Inspect packaging  
● Check invoice (receiving only what was ordered?) | ● Reject the food  
● Contact supplier  
● Change delivery schedule, type, or quantity of food ordered  
● Train employees on proper receiving practices | ● Review temperature logs  
● Review invoices  
● Inspect delivery vehicle to determine if clean and refrigerated (if appropriate)  
● Review corrective action records |
| **STORE** | ● Maintain cold food at 41°F or below  
● Protect from contamination  
● Follow the recommended sell-by / use-by dates  
● Label and date food for proper rotation  
● Store food off the floor | ● Measure and document food temperature  
● Inspect food for signs of contamination  
● Check refrigeration units (overstocked? clean?)  
● Measure and document equipment temperatures  
● Calibrate food and equipment thermometers | ● Discard contaminated food  
● Cover food  
● Relocate food  
● Provide adequate refrigeration  
● Repair refrigeration units  
● Repair or replace non-functioning thermometers  
● Train employees on proper food storage practices | ● Review food temperature logs  
● Review equipment temperature logs  
● Review equipment maintenance invoices  
● Review calibration logs  
● Review corrective action records |
| **COLD HOLD** | ● 41°F or below  
● Frozen foods at 0°F or below  
● Pasteurized crab meat at 38°F or below  
● Shell eggs at 45°F or below  
● Shellfish at 45°F or below | ● Measure and document food temperature  
● Inspect for signs of contamination  
● Check for overstocking of refrigeration units  
● Measure and document equipment temperatures  
● Calibrate food and equipment thermometers  
● Check food labels and dates | ● Adjust thermostat to a lower setting  
● Use proper equipment  
● Discard food if above 41°F for more than 2 hours  
● Cover food  
● Relocate food  
● Provide adequate refrigeration  
● Repair refrigeration units  
● Repair or replace non-functioning thermometers  
● Train employees on proper cold holding practices | ● Review food temperature logs  
● Review equipment temperature logs  
● Review equipment maintenance invoices  
● Review calibration logs  
● Review corrective action records  
● Review employee training logs |
<table>
<thead>
<tr>
<th>STEP (Control Point / CP or Critical Control Point / CCP)</th>
<th>CRITICAL LIMIT (What is the standard that must be met?)</th>
<th>MONITORING PROCEDURE (Is the critical limit being met?)</th>
<th>SAMPLE CORRECTIVE ACTIONS (How can you protect the public and bring the process back into control?)</th>
<th>VERIFICATION (Do your procedures ensure the critical limit is being met?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>THAW</td>
<td>● In a refrigerator at 41°F or below</td>
<td>● Measure and document food temperatures</td>
<td>● Refrigerate for a longer period of time</td>
<td>● Review food temperature logs</td>
</tr>
<tr>
<td></td>
<td>● Under running potable water less than 70°F</td>
<td>● Measure and document equipment or water temperatures</td>
<td>● Discard product if above 41°F for more than 2 hours</td>
<td>● Review equipment temperature logs</td>
</tr>
<tr>
<td></td>
<td>● In a microwave as part of the cooking process</td>
<td>● Check to see that food and equipment thermometers are properly calibrated</td>
<td>● Cook from a frozen state</td>
<td>● Review equipment maintenance invoices</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>● Calibrate food and equipment thermometers</td>
<td>● Review calibration logs</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>● Train employees on proper food thawing practices</td>
<td>● Review corrective action records</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Review employee training logs</td>
</tr>
<tr>
<td>COMBINE / PROCESS</td>
<td>● Wash hands properly</td>
<td>● Measure and document food temperatures</td>
<td>● Minimize the time that the food is out of temperature control</td>
<td>● Review food temperature logs</td>
</tr>
<tr>
<td></td>
<td>● Wash and sanitize utensils and work surfaces</td>
<td>● Measure and document equipment or water temperatures</td>
<td>● Discard food is above 41°F for more than 2 hours</td>
<td>● Review equipment temperature logs</td>
</tr>
<tr>
<td></td>
<td>● Wear single use gloves when handling ready-to-eat food</td>
<td>● Check handsinks for soap, paper towels, and hot and cold water</td>
<td>● Use separate areas and utensils for raw and cooked food preparation</td>
<td>● Review equipment maintenance invoices</td>
</tr>
<tr>
<td></td>
<td>● Pre-chill ingredients for ready-to-eat food</td>
<td>● Check sanitizer concentration</td>
<td>● Wear single use gloves when handling ready-to-eat food</td>
<td>● Review calibration logs</td>
</tr>
<tr>
<td></td>
<td>● Wash / peel raw fruits and vegetables</td>
<td>● Observe handwashing practices</td>
<td>● Rapidly re-chill finished food</td>
<td>● Review corrective action records</td>
</tr>
<tr>
<td></td>
<td>● Food is held out of temperature control for less than 2 hours if rapidly re-chilled to 41°F</td>
<td>● Observe food handling practices</td>
<td>● Decrease volume of food being prepared / out of refrigeration at one time</td>
<td>● Review employee training logs</td>
</tr>
<tr>
<td></td>
<td>● Eggs are cold held when not combined for immediate service</td>
<td>● Observe cleaning practices</td>
<td>● Use proper utensils that have been washed and sanitized</td>
<td></td>
</tr>
<tr>
<td></td>
<td>● Minimize hand contact</td>
<td>● Check for illness in employees</td>
<td>● Remove ill or infected employees from food handling duties</td>
<td></td>
</tr>
<tr>
<td></td>
<td>● Prohibit ill or infected employees from handling food</td>
<td>● Check for burns, cuts, boils, or excessive jewelry on employees’ hands</td>
<td>● Remove excessive jewelry and wash hands before continuing food handling duties</td>
<td></td>
</tr>
<tr>
<td></td>
<td>● Avoid cross contamination of food, utensils, and work surfaces</td>
<td></td>
<td>● Train employees on proper food handling practices and equipment washing procedures</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>STEP</strong> (Control Point / CP or Critical Control Point / CCP)</td>
<td><strong>CRITICAL LIMIT</strong> (What is the standard that must be met?)</td>
<td><strong>MONITORING PROCEDURE</strong> (Is the critical limit being met?)</td>
<td><strong>SAMPLE CORRECTIVE ACTIONS</strong> (How can you protect the public and bring the process back into control)</td>
<td><strong>VERIFICATION</strong> (Do your procedures ensure the critical limit is being met?)</td>
</tr>
<tr>
<td>---</td>
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<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>COOK</strong> (At required minimum temperature for at least 15 seconds, except whole roasts)</td>
<td>● Poultry and stuffed meats or pasta at 165°F or above  ● Raw foods of animal origin cooked in a microwave (hold for at least 2 minutes after cooking)  ● Ground beef at 155°F or above  ● Pork at 155°F or above  ● Shell eggs for immediate service, fish, other meats at 145°F  ● Shell eggs not for immediate service and injected meats at 155°F  ● Whole roasts at 130°F for 122 minutes or as specified in COMAR 10.15.03.10A(1)  ● Fruits and vegetables cooked for hot holding and commercially processed foods at 135°F</td>
<td>● Measure and document food temperatures  ● Measure and document equipment temperatures  ● Observe cooking practices  ● Check to see that food and equipment thermometers are properly calibrated</td>
<td>● Increase cooking time  ● Adjust thermostat to a higher setting  ● Use proper equipment  ● Cook smaller amounts of food  ● Relocate food  ● Provide adequate cooking equipment  ● Repair or replace non-functioning equipment or thermometers  ● Calibrate food and equipment thermometers  ● Train employees on proper cooking temperatures</td>
<td>● Review food temperature logs  ● Review equipment temperature logs  ● Review equipment maintenance invoices  ● Review calibration logs  ● Review corrective action records  ● Review employee training logs</td>
</tr>
<tr>
<td><strong>HOT HOLD</strong></td>
<td>● 135°F or above</td>
<td>● Measure and document food temperatures every 2 hours  ● Measure and document equipment temperatures  ● Observe hot holding practices  ● Check to see that food and equipment thermometers are properly calibrated</td>
<td>● Reheat food to at least 165°F if below 135°F for not more than 2 hours  ● Discard food after 2 hours  ● Reduce the amount of food  ● Preheat equipment  ● Cover the food to retain heat  ● Use shallow containers  ● Stir frequently  ● Use proper equipment  ● Repair or replace non-functioning equipment or thermometers  ● Calibrate food and equipment thermometers  ● Train employees on proper hot holding practices</td>
<td>● Review food temperature logs  ● Review equipment temperature logs  ● Review equipment maintenance invoices  ● Review calibration logs  ● Review corrective action records  ● Review employee training logs</td>
</tr>
<tr>
<td>STEP (Control Point / CP or Critical Control Point / CCP)</td>
<td>CRITICAL LIMIT (What is the standard that must be met?)</td>
<td>MONITORING PROCEDURE (Is the critical limit being met?)</td>
<td>SAMPLE CORRECTIVE ACTIONS (How can you protect the public and bring the process back into control?)</td>
<td>VERIFICATION (Do your procedures ensure the critical limit is being met?)</td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>-----------------------------------------------------</td>
<td>---------------------------------------------------------</td>
<td>-----------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>COOLING</strong></td>
<td>• Hot Foods: To 41°F or below within 6 hours (i.e., from 135°F to 70°F within 2 hours and from 70°F to 41°F within 4 hours) • Ready-To-Eat Foods for cold service: To 41°F or below within 4 hours</td>
<td>• Measure and document food temperature • Measure and document equipment temperatures • Observe cooling practices • Check to see that food and equipment thermometers are properly calibrated • Check for signs of contamination</td>
<td>• Refrigerate in uncovered pans with food not more than 3 inches deep • Use an ice bath with frequent stirring • Reduce the volume of food • Cook then serve immediately, eliminating the need to cool • Use a blast chiller • Provide additional refrigeration equipment • Discard hot food if above 41°F for more than 6 hours • Discard cold service foods if above 41°F for more than 4 hours • Use a cooling wand • Add ice made from potable water as an ingredient • Train employees on proper cooling practices</td>
<td>• Review cooling logs • Review equipment temperature logs • Review equipment maintenance invoices • Review calibration logs • Review corrective action records • Review employee training logs</td>
</tr>
<tr>
<td><strong>REHEAT</strong></td>
<td>• 165°F or above within 2 hours</td>
<td>• Measure and document food temperature • Measure and document equipment temperatures • Observe reheating practices • Check to see that food and equipment thermometers are properly calibrated</td>
<td>• Increase the temperature of the reheating equipment • Increase the reheating time, but keeping within 2 hours • Reduce the volume of food • Use a more rapid reheating procedure • Prepare only the amount needed for a meal to avoid leftovers • Discard leftovers • Purchase additional cooking equipment • Train employees on proper reheating practices</td>
<td>• Review food temperature logs • Review equipment temperature logs • Review equipment maintenance invoices • Review calibration logs • Review corrective action records • Review employee training logs</td>
</tr>
<tr>
<td><strong>DELIVER</strong></td>
<td>• Cold Foods: At 41°F or below • Hot Foods: At 135°F or above</td>
<td>• Measure and document food temperature • Measure and document equipment temperatures • Observe reheating practices • Check to see that food and equipment thermometers are properly calibrated</td>
<td>• Use insulated or temperature controlled equipment or containers • Use temperature controlled vehicles • Reduce delivery area • Keep food covered during transport • Train employees on proper delivery practices</td>
<td>• Review food temperature logs • Review equipment temperature logs • Review equipment maintenance invoices • Review calibration logs • Review corrective action records • Review employee training logs</td>
</tr>
</tbody>
</table>
STATE OF MARYLAND
WORKERS' COMPENSATION COMMISSION
10 EAST BALTIMORE STREET
BALTIMORE, MD 21202-1641

CERTIFICATE OF COMPLIANCE

Based solely on the application submitted to the Workers' Compensation Commission by the individual/business named below, the individual/business appears to be in compliance with the Maryland Workers' Compensation Act; therefore, pursuant to § 9-105 of the Labor and Employment Article of the Annotated Code of Maryland, this Certificate of Compliance is presented on this day, September 4, 2018.

To

This Certificate is not binding on the Workers' Compensation Commission under any circumstance. This Certificate may be used only to secure a license from a governmental agency that requires proof of workers' compensation coverage or exemption from workers' compensation insurance.

[Signature]
Appointing Authority
RE: Workers' Compensation

Dear Food Service Facility Licensee:

Under the State of Maryland HEALTH-GENERAL Annotated Code § 1-202; Before any license or permit may be issued, an employer who engages in an activity in which the employer may employ a covered employee, as defined in § 9-101 of the Labor and Employment Article, the employer shall file with the issuing authority (in this case, our office):

(1) A certificate of compliance with the Maryland Workers' Compensation Act; or

(2) The number of a workers' compensation insurance policy or binder.

A covered employee, as defined in § 9-101, means an individual for whom a person, a governmental unit, or a quasi-public corporation is required by law to provide Workers' Compensation Insurance coverage. A sole proprietor, Code Ann. § 9-227, however is not considered a covered employee. If you are a sole proprietor who does not hire any covered employees, Workers' Compensation insurance is not necessary. An officer of a Corporation or a member of a limited liability company (LLC), Code Ann. § 9-206, consequently is considered a covered employee if the officer or member provides a service for the Corporation or LLC for monetary compensation. A Corporation or LLC must therefore have Workers' Compensation Insurance, with or without employees.

If your business is a Corporation or LLC, you may elect to be exempt from Workers' Compensation Insurance. To do so, you must obtain a “Certificate of Compliance” issued by the State of Maryland Workers’ Compensation Commission. To apply for a “Certificate of Compliance”, please contact the Workers’ Compensation Commission at 410-864-5100 or 800-492-0479.
CERTIFIED FOOD SERVICE MANAGER ("CFSM") - FACT SHEET

Montgomery County Code 15-8(b)(2) states a licensee must not operate a food service facility unless the facility is under the immediate control of a Certified Food Service Manager.

As a CFSM applicant, how do I obtain a Montgomery County CFSM License?

1. Applicant must successfully complete an approved Food Service Manager's course.
2. Complete the Certified Food Service Manager License Application, A Montgomery County CFSM Photo identification card is valid for a maximum of three (3) years from the initial completion date of the approved course.
3. Submit application to the Department of Health and Human Services, Licensure and Regulatory Services office: at 2425 Reedie Drive, 9th Floor Wheaton, MD. Monday through Friday, 8:00 a.m. to 12:00 p.m.
4. Pay $50 CFSM fee. Payments made by Master Card, Visa, Money Order, or Check, made payable to "Montgomery County Government". NO CASH payments accepted.

Required CFSM Documents*

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<tr>
<th>In order to receive a Montgomery County CFSM photo ID, you must have, or complete the following:</th>
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<tr>
<td><strong>&quot;New&quot; Certification</strong></td>
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<td>AND, Provide government-issued photo identification;</td>
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<td>AND, Complete and submit an application in person.</td>
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Food Allergen Awareness and Training

With approximately 15 million Americans affected by food allergies each year, Montgomery County is trying to create a safer dining out experience for an individual and families managing food allergies. Although most food allergies cause relatively mild to minor symptoms, some food allergies can cause severe reactions, and may even be life-threatening. While there is no cure for food allergies, strict avoidance of food allergens, early recognition and management of allergic reactions to food are important measures to prevent serious health consequences.

Maryland Code Annotated, Health-General 21-330.2(A)
As of March 1, 2014, state law requires that "a food establishment shall display prominently in the staff area of the food establishment a poster related to food allergy awareness that includes information regarding the risk of an allergic reaction."

- Allergy Awareness Poster (English) (Spanish)

Montgomery County Bill 33-16
On November 1, 2016, the Montgomery County Council, sitting as the Board of Health, went a step further and enacted Bill 33-16, Eating and Drinking Establishments -Food Allergen Awareness Training.

Effective July 1, 2017, Bill 33-16 requires all "Eating and Drinking Establishments", which are required to be under the immediate control of a certified food service manager, to have on the premises at all times when food is being prepared or served, an employee who has completed a food allergen awareness training course and passed a test as required by this Regulation to protect the health of county residents.

A trained employee with a valid certification must be on the premise at all times when food is being prepared or served in order to meet compliance.

How do I take a Food Allergen Awareness Training?
Anyone may take the training. The applicant must successfully complete one of the approved online Food Allergen Awareness Training courses and pass the exam. Once completed, the applicant will receive a certificate to show proof of completion. The certificate is valid as accredited through ANSI from the initial completion date of the approved course.

Approved Food Allergen Awareness Training courses
Food Allergy Research & Education (FARE) works on behalf of the 15 million Americans with food allergies, including all those at risk for life-threatening anaphylaxis. FARE partnered with two trusted resources, the National Restaurant Association and MenuTrinfo, LLC for endorsement of their food allergen training programs. To find out more about FARE or these training programs, please visit the FARE website. You may also go directly to the course web links below.

These trainings are the only food allergen awareness courses approved by the Department for compliance with Montgomery County Bill 33-16.

National Restaurant Association
MenuTrinfo, LLC approved training includes both AllerTrain™ and AllerTrain Lite™
AboveTraining/StateFoodSafety.com
TAP Series
Parking Location for Inspection