

## Mobile Food Guidance Document

This packet is to help inform potential mobile food operators of basic requirements for the licensing of a mobile operation. A mobile food service operation is a movable vehicle or portable structure that routinely changes location, except that if the operation remains at any one location for more than forty consecutive days, the operation is no longer a mobile food service operation. A mobile food establishment is essentially a restaurant on wheels. It must meet all rules of the Ohio Uniform Food Safety Code. Also, like any other food establishment, Mobile food service operations must meet all local and state regulations. For your convenience, a list is attached of agencies you may want to check with before opening.

To obtain a Mobile Food License, please fill out the application, pay your Mobile License Fee and provide the Marion Public Health Department with:

- A detailed floor plan drawing of the entire operation which shows the layout, proposed equipment locations, plumbing locations, etc.
- An equipment list with manufacturers' names and model numbers
- A materials and surface finish list (list of what the floors, walls, ceilings & countertops are made from)
- The proposed menu
- Person-in-Charge certification from an approved course provider
- Water supply source and wastewater disposal system
  - If using a self-contained water supply, it must be obtained from an approved source. A water sample will be required if using a private water system.

Here is a short list of important requirements that are looked for in a mobile unit. This is not a comprehensive list but hits on some significant needs in a mobile unit. They are as follows:

- Commercial cooking equipment
- 3 compartment sink- large enough to handle all items that must be washed/rinsed/sanitized
- Hand wash sink with hot/cold water supply
- Prep sink for prepping vegetables/thawing foods, if needed
- Water system that can handle the hot/cold water needs of the operation
- Adequate fresh / wastewater storage (**grey water tank must be 15% larger capacity than the fresh water tank**)
- Backflow prevention device (ASSE 1011, 1012 or 1024)
- Hot and cold holding units (Hot holding units are not permitted for cooking food)
- Name of operation, City of Origin, and Zip Code- **Must be at least 3 inches high and 1 inch wide on the exterior of the unit**

- The telephone number **must** be displayed on the exterior of the unit
- Smooth, non-absorbent and easily cleanable flooring, ceiling, walls
- Some type of Floor (for Knockdown Concessions)
- Proper lighting requirements

As of September 4, 2024, each mobile is required to have a person in charge certification for at least one person per license holder at each individual event in high risk mobile food service operations and high risk retail food establishments. The following courses are approved by the Ohio Department of Health:

- <https://www.statefoodsafety.com/food-handler/ohio-level-one-certification>
- <https://www.servsafe.com/access/SS/catalog/ProductDetail/SSOHPIC1EONL>
- <https://foodsafepal.com/food-handler-card/ohio/>
- <https://www.360training.com/>
- <https://www.responsibletraining.com/content/default.aspx>
- <https://aaafoodhandler.com/>

The following links and references may provide you with helpful information.

<http://codes.ohio.gov/oac/3701-21>

<http://codes.ohio.gov/orc/3717>

- OAC 3701-21-02(H)
- OAC 3717-1-5.2(J)
- OAC 3717-1-5.3(A)
- OAC 3717-1-5.3(F)

If you have any questions, please contact Marion Public Health at (740) 382-6520.

## Ohio Fire Regulations for Mobile Food Trucks

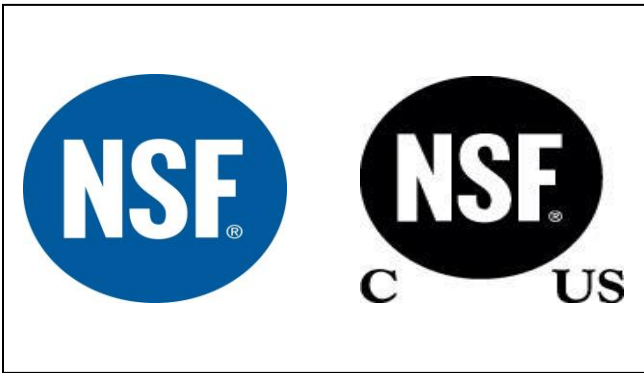
Mobile food trucks are required by law to be inspected by the Marion City Fire Department. A mobile food unit checklist has been attached to ensure your mobile truck is in compliance with the fire department. Flat top griddles/grills and deep fryers are required to be placed under an exhaust hood. If you have any questions in regards to fire regulations, please contact the Marion City Fire Department at (740) 382-0040.

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## Commercially Certified Equipment

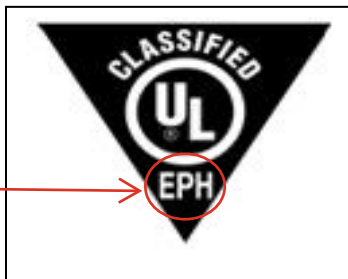
Only commercial equipment approved by a recognized food equipment testing agency, as acceptable for use in a food service operation or retail food establishment, will be accepted as specified under rule 3717-1-04.1(kk) of the Ohio Administrative Code.

The following are examples of marks used by some of the approved testing agencies:



### National Sanitation Foundation (NSF)

- NSF International's primary focus is on creating and maintaining sanitation standards for the food service industry.
- An NSF symbol with a "C" to the bottom left and a "US" to the bottom right denotes that the product has been certified to meet both Canadian and U.S. safety and sanitation requirements.



Must say "EPH"

### Underwriters Laboratories (UL)

- This symbol appears on products that are certified to meet specific environmental and public health standards. If it shows the word "Classified" above the UL mark, then the product also complies with [NSF/ANSI](#) regulations.



Must say  
"Sanitation"

### Canadian Standards Association (CSA)

- A CSA sanitation mark is found on products that have been tested and found to meet all applicable [NSF/ANSI](#) sanitation requirements.



Must say  
"Sanitation"

### Edison Testing Laboratories (ETL Intertek)

- The ETL Sanitation mark is awarded to food service equipment that has been rigorously tested against national sanitation requirements [NSF/ANSI](#).
- This mark ensures that the equipment is fit for use during food production as the manufacturer has not only passed the initial testing, but remains in compliance by completing periodic follow-up inspections.

2025 Application for a License to Conduct a: (check only one)

☐ Food Service Operation

☐ Retail Food Establishment

Instructions:

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application.
3. Make a check or money order payable to: MARION PUBLIC HEALTH
4. Return check and signed application to: MARION PUBLIC HEALTH  
181 S Main Street  
Marion, OH 43302

\*There is a mandatory penalty fee of 25% of the renewal fee for operating a food service operation or retail food establishment after the deadline (Chapter 3717 of the Ohio Revised Code).

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing/renewing a license. This action is governed by Ohio Revised Code 3717.

|                                                                                                                       |            |                                                                                            |     |
|-----------------------------------------------------------------------------------------------------------------------|------------|--------------------------------------------------------------------------------------------|-----|
| Name of Facility                                                                                                      |            | Name of License Holder                                                                     |     |
| Address                                                                                                               |            | E-mail                                                                                     |     |
| City                                                                                                                  |            | State<br>OH                                                                                | ZIP |
| Phone #<br>( )                                                                                                        | Fax<br>( ) | Check if applicable<br><input type="checkbox"/> Catering <input type="checkbox"/> Seasonal |     |
| Name of individual certified in food protection (if any) and their certificate number (use back for additional names) |            |                                                                                            |     |

Mailing address for annual renewal if different than above:

|                                 |  |                |     |
|---------------------------------|--|----------------|-----|
| Name of parent company or owner |  | Phone #<br>( ) |     |
| Address                         |  | E-mail         |     |
| City                            |  | State          | ZIP |

I hereby certify that I am the license holder, or the authorized representative, of the food service operation or retail food establishment indicated above:

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

Licenser to complete below

|             |            |                |                    |
|-------------|------------|----------------|--------------------|
| Category    |            |                |                    |
| License fee | + Late fee | + State amount | = Total amount due |

Application approved for license and certified as required by Chapter 3717 of the Ohio Revised Code.

|    |      |           |            |
|----|------|-----------|------------|
| By | Date | Audit no. | License no |
|----|------|-----------|------------|

**Diagram & Requirements  
for  
Mobile Food Service Plan Submission**

Scale: 1" = 3ft

4

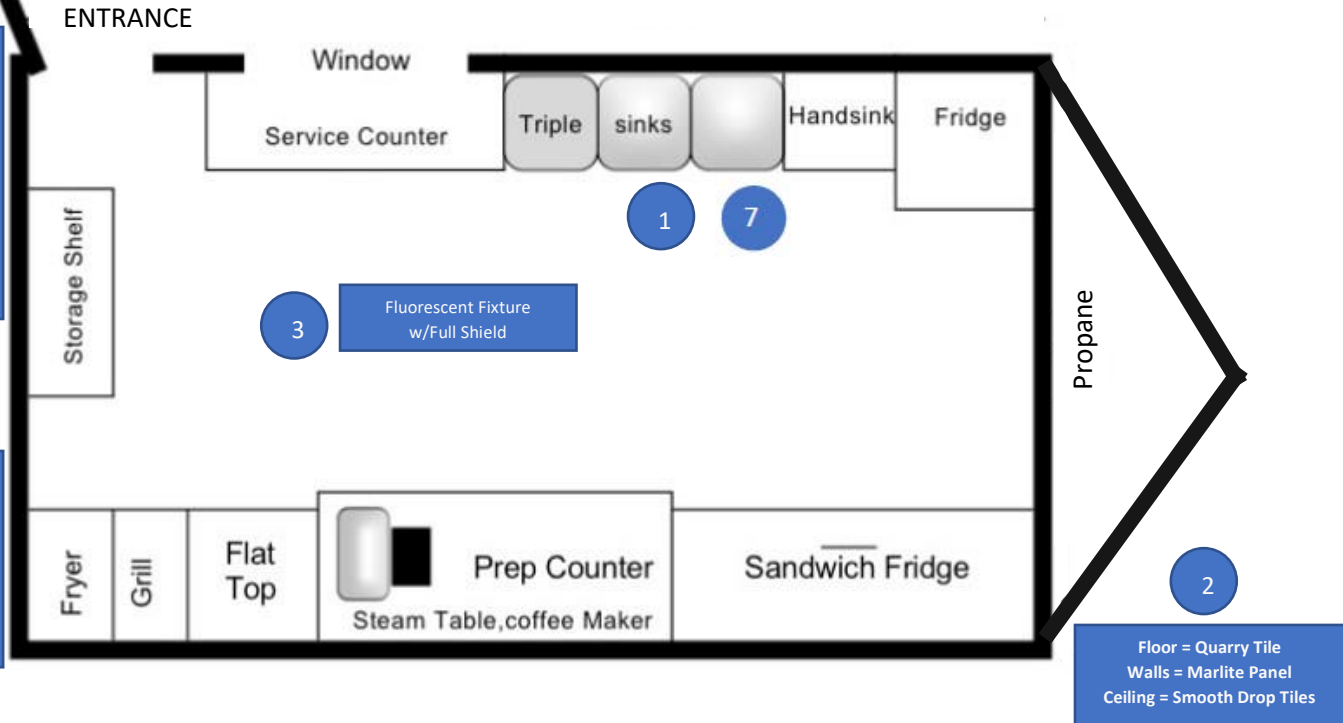
**Equipment List**

Flat Top, Vulcan TS-222  
Cooler, Hobart CL-8-T  
Handsink, Advance S-1-T8  
Fryer, Duke 307FRY  
Triple Sink, ABC 32F2  
Fridge, Hobart FR345  
Grill, Advance 3-1-FB  
Sandwich Fridge, LG XHML

6

**Menu**

Chicken Strips  
French Fries  
Lemonade  
Coffee  
Hamburgers



Drawing must be ½ page in size

1

Indicate layout of all food service equipment. Draw pieces in their exact locations.  
(Sinks, coolers, freezers, cooking equipment, etc.)

2

Indicate all finishes to be installed on the floors, walls & ceilings.

3

Indicate exact location of lighting fixtures.

4

Provide a list of all equipment to be installed, including the make and model numbers.  
(Example: Grill – Advance 3-1-FB)

5

Indicate scale: Plans must be drawn reasonably to scale and fit on a ½ page of paper  
(5"1/2in. x 8"12 in.)

6

Provide a menu indicating all foods to be served from the facility.

7

Location and capacity of greywater and freshwater tanks. (Grey water tank must be a larger capacity than the freshwater tank)

4

**Equipment List**  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_  
6. \_\_\_\_\_  
7. \_\_\_\_\_  
8. \_\_\_\_\_  
9. \_\_\_\_\_  
10. \_\_\_\_\_

1

Facility Name:

\_\_\_\_\_

5

Scale:

\_\_\_\_\_

6

Menu

\_\_\_\_\_

2

Floor = \_\_\_\_\_

Walls = \_\_\_\_\_

Ceiling = \_\_\_\_\_

3

Location of Lights in mobile

\_\_\_\_\_

7

Location of Grey water and freshwater tanks w/ capacities

\_\_\_\_\_

Indicate Backflow prevention with a STAR ★

Drawing must be ½ page in size

- 1 Indicate layout of all food service equipment. Draw pieces in their exact locations.  
(Sinks, coolers, freezers, cooking equipment, etc.)
- 2 Indicate all finishes to be installed on the floors, walls & ceilings.
- 3 Indicate exact location of lighting fixtures.
- 4 Provide a list of all equipment to be installed, including the make and model numbers.  
(Example: Grill – Advance 3-1-FB)
- 5 Indicate scale: Plans must be drawn reasonably to scale and fit on a ½ page of paper  
(5”1/2in. x 8/12 in.)
- 6 Provide a menu indicating all foods to be served from the facility.
- 7 Location and capacity of greywater and freshwater tanks. (Grey water tank must be a larger capacity than the freshwater tank) Indicate Backflow prevention with a STAR ★



State Fire Marshal

Department of Commerce

# MOBILE FOOD PREPARATION VEHICLE CHECKLIST

## Mobile Food Preparation Vehicles

Is a permit required?

Yes

☐

No

☐

N/A

☐

Was a permit issued?

☐☐☐

## Carbon Monoxide Detection

Does the unit have any gas containers or a generator within 10 feet?

☐☐☐

Does the unit have at least one carbon monoxide detector?

☐☐☐

## Portable Fire Extinguishers

Is there at least one 5 lb. ABC portable fire extinguisher in the unit?

☐☐☐

If cooking with grease laden vapors, is a Class K fire extinguisher also present?

☐☐☐

Are the extinguishers unobstructed and easily accessible?

☐☐☐

Have the extinguishers been inspected and tagged within the last 12 months?

☐☐☐

## No Smoking Signs - Smoking prohibited within 10 feet of unit

Are "NO SMOKING" signs conspicuously posted inside and outside the unit?

☐☐☐

Are signs in clear English with letters at least 4 inches tall and 1 inch wide?

☐☐☐

If compressed gas is stored or kept, are there also "no smoking" signs posted outside the unit, in the vicinity of every location where the gas is stored or kept?

☐☐☐

## Not Obstructing Fire Protection Equipment

Does the unit block fire lanes?

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Does the unit block fire hydrants or any fire protection equipment?

☐☐☐

## Separation Distances

Is the unit separated from any other unit by at least 3 feet?

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Is the unit separated from any other structure, or exit of a structure, by 10 feet?

☐☐☐

Is the unit clear from any combustibles by at least 10 feet?

☐☐☐

## Electrical Equipment and Wiring

Is all electrical equipment and wiring in the unit installed per NFPA 70?

☐☐☐

## Generators

Is the generator being fueled while the food preparation vehicle is in operation?

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Is the generator being fueled while the generator is in operation?

☐☐☐

Is the generator being used or fueled in the occupant space?

☐☐☐

Is the generator turned off and surface temperatures cooled below autoignition before being fueled?

☐☐☐

## Means of Egress

Are there at least two means of egress?

☐☐☐

Are the means of egress located away from each other?

☐☐☐

Are the means of egress at least 5.7 ft<sup>2</sup> in size?

☐☐☐

**Kitchen Exhaust Hood / Automatic Fire Suppression**

|                                                                                                                                                                            | Yes                      | No                       | N/A                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| Are grease laden vapors being produced?                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>*If yes, a kitchen exhaust hood system is required.</b>                                                                                                                 |                          |                          |                          |
| Was the unit first operational or titled as a mobile food preparation vehicle on or after May 1, 2026? <b>*If yes, an automatic fire extinguishing system is required.</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Was there a substantial modification to / remodel of the cooking equipment on or after May 1, 2026? <b>*If yes, an automatic fire extinguishing system is required.</b>    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the fire extinguishing system tagged and been inspected within 6 months?                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the hood and exhaust system clean per OFC requirements?                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**LP-Gas**

|                                                                                                                                                                                                                                                                  |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| If LP-Gas equipment is being used while unit is in transit, is the equipment designed for operation while in transit (ex: cargo heater) and does the equipment have a mechanism in place to stop fuel flow in the event of a line break (ex: excess flow valve)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are only certified ASME or DOTn mobile LP-Gas containers being used?                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do all LP-Gas containers installed in the enclosed spaces of the mobile food unit have a maximum allowable working pressure of 312 psi (2.2 MPag) or higher?                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do all LP-Gas containers installed on the exterior of the mobile food unit have a maximum allowable working pressure of 250 psi (1.7 MPag) or higher?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are all propane tanks secured properly using non-combustible material(s)?                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are propane tanks that are mounted on rear of vehicle at least 30" from ground?                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the maximum aggregate capacity of all LP-Gas containers in the mobile food unit 200-gallons aggregate water capacity or less?                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are LP-Gas containers in compliance with OFC Chapter 61 and NFPA 58?                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If LP-Gas containers are removed from unit for unit operations or food preparation, are containers secured using non combustible material(s)?                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are containers that are not attached to the unit 10 feet away?                                                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are all valves, lines and connections protected to prevent damage?                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Piping , Connectors and Hose (including flexible hoses )**

|                                                                                    |                          |                          |                          |
|------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| Has a certified inspection of the gas piping been completed and a report provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is all piping, connections and hose installed per NPFA 58?                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are all components protected from damage caused by impact and/or vibration?        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**LP-Gas Emergency Shut-Off Controls**

|                                                                                                                             |                          |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| Does the mobile food unit have marked exterior emergency shut off controls?                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are the controls readily distinguishable and accessible?                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the control valve a quarter-turn manual gas ball valve?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do the controls have permanent signage mounted at the location of the controls that states: "EMERGENCY GAS SHUT-OFF VALVE"? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the signage clearly visible and unobscured?                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the signage weather resistant and of contrasting colors?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the signage readable from a distance of 25 feet?                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Name of Vendor:

Inspection location:

Fire Department Name

Date of Inspection

Inspected by:

Inspector Name: