Renewal Mobile Retail Food Establishment Packet

Complete steps 1-7 in the instruction box below. Ensure all aspects of this document accurately reflect the physical properties of the mobile retail food establishment. Any inaccuracies or falsification during the licensing process may result in a rejected application. **INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED**

For complete requirements and regulations regarding mobile retail food establishments, call 720-913-1311 or refer to each regulatory agency’s website:

- Department of Excise and Licenses: [www.denvergov.org/businesslicensing](http://www.denvergov.org/businesslicensing)
- Department of Public Health & Environment: [www.denvergov.org/healthinspections](http://www.denvergov.org/healthinspections)
- Fire Department: [www.denvergov.org/fire](http://www.denvergov.org/fire) (reference permits and licensing tab, fire safety permits)
- Community Planning and Development/Zoning Department: [www.denvergov.org/zoning](http://www.denvergov.org/zoning)
- Department of Transportation and Infrastructure: [http://www.denvergov.org/doti](http://www.denvergov.org/doti)

1. **Gather the following BEFORE submitting this renewal packet for review to Excise and Licenses:**
   - Follow these instructions if you have propane on your unit to obtain and pay for the fire safety operational permit (Fire Prevention Flammable Operational Permit). If you do not have propane on your unit, email dfdmobiles@denvergov.org for a propane exemption letter.
   - **Renewal Questionnaire (Pages 2)**
   - **Affidavit of Commissary (Page 3)** with Business Operator and Commissary Operator sections completed.
   - **Note:** If you are operating multiple stands/mobiles, such as Tim's Tacos #1 and Tim's Tacos #2, you will need to obtain separate licenses for each and submit separate affidavits to the department for approval.
   - **Acknowledgement Letter (Page 4/5)** both pages signed and dated
   - **Printed, clear, color pictures** of the following items printed on an 8.5” x 11” sheet of printer paper. Print 1 picture per page (blurry, dark, or grainy pictures will not be accepted):
     - Clean water and wastewater tanks
     - Kitchen equipment such as cooking equipment, sinks, and refrigerators
     - Outside of mobile unit from all sides
   - Manufacturer specifications (spec sheets) for all appliances including cooking equipment and refrigeration, if available
   - Complete all sections of the packet. If something is not on your mobile unit, please put ‘N/A’

2. **Submit all items from step 1 to the Department of Excise and License (Dept of EXL) via email or in person:**
   - **Email:** EXLSubmit@denvergov.org OR
   - **In person:** Department of Excise and Licenses
     - 201 Colfax Ave., Suite 206
     - Denver 80202

3. After submitting the application, the Dept of EXL will issue a receipt.
4. Pay your invoice for the license
5. Your packet will be reviewed by a representative of the Department of Public Health and Environment (DDPHE). You will be contacted directly by DDPHE within 7-10 business days of submitting the packet to gather additional information or approve the unit for operation. (No physical inspection required)
6. Contact the Denver Fire Department (DFD) via email at dfdmobiles@denvergov.org or by phone at 720-454-6692 to schedule your in-person fire safety inspection.
7. Once unit has been approved by DFD during the physical inspection and remotely by DDPHE, a license will be issued for the mobile unit by Excise and Licenses via email, make sure your email address is legible and accurate.

**Note: If operating on private property, a zoning permit from the Zoning Department and permission letter from the property owner will need to be obtained**
Renewal Questionnaire

Name of Mobile Unit: ___________________________ License Plate: ___________________________

Business File Number (BFN): ___________________________ VIN: ___________________________

Type of unit: □ Truck □ Trailer □ Cart

Preferred Language: □ English □ Español □ Other __________

Operator’s Name: ___________________________

Operator’s Phone: ___________________________ Operator’s Email: ___________________________

Operator’s Mailing Address: ___________________________

Where do you plan to sell food? (Please check all applicable boxes and complete corresponding chart below)

- □ Route, where you go from location to location and make frequent stops during your operation hours
- □ Single Location(s), such as breweries, a tire shop, parking lot, a meter downtown, office building, etc.^^
- □ Event(s), such as Civic Center Eats, Taste of Colorado, Farmer’s Markets, etc.

<table>
<thead>
<tr>
<th>Operating Address(es) or Event</th>
<th>Days of Operation</th>
<th>Hours of Operation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ex: Bob’s Plumbing at 40th and Steele</td>
<td>Monday-Friday</td>
<td>10:15 am-1:30 pm</td>
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</tbody>
</table>

Have you added, removed, or changed anything including equipment, on the unit? □ YES □ NO

If yes, what? ___________________________

<table>
<thead>
<tr>
<th>Indicate, using numbers, how many pieces of equipment are on the unit: (ex: 1 hand washing sink, 2 Fryers, 1 Grill)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand Washing Sink</td>
</tr>
<tr>
<td>3-Compartment Sink</td>
</tr>
<tr>
<td>Food Preparation Sink</td>
</tr>
<tr>
<td>Mop/Dump/Utility Sink</td>
</tr>
</tbody>
</table>

The mobile unit has no cooking equipment, and all foods are pre-packaged □ YES □ NO

Please calculate the water tank size(s) using this [online calculator](#) and complete boxes below:

<table>
<thead>
<tr>
<th>Provide measurements in INCHES</th>
<th>Length (l)</th>
<th>Width (w)</th>
<th>Height (h)</th>
<th>Total Gallons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clean water tank measurements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dirty water tank measurements</td>
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</table>
Affidavit of Commissary

Completed by Business Operator

Business Name: ____________________________________  Business LLC/INC: ____________________________________________
Owner/Operator’s Name: ____________________________________  Operator’s Telephone Number: ___________________________
Operator’s Email Address: ____________________________________  License Plate of Mobile Unit: ____________________________
Operator’s Mailing Address: ___________________________________________________________________________________
City: ____________________________________  State: __________  Zip Code: __________  Hemp Derived Cannabinoids (Y / N)?: ______

Intended Weekly Commissary Schedule (Put N/A on days you do not work at the commissary):

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start Time</td>
<td></td>
<td></td>
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<tr>
<td>End Time</td>
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</table>

How do you record your time at the commissary? ☐ Sign-in sheet  ☐ Electronic Punch  ☐ Other: ______________________________

As owner/representative of the above-named business, I offer this affidavit as proof that I will prepare my food in a licensed food facility under the laws governing my business type in the City and County of Denver’s Food Establishment Rules and Regulations, Chapter 23 of the Denver Revised Municipal Code.

❖ I will submit a new affidavit for approval if change the commissary listed below.
❖ I will not use my home to store or prepare food.
❖ I understand that not using my commissary may result in fines or disposal of food.

I affirm that the above information is correct and true by signing below.

Signature of Business Operator  Date

Completed by Commissary Operator

Commissary Name: ____________________________________  Commissary Operator’s Name: ____________________________
Commissary Address: ___________________________________________________________________________________
Commissary is regulated by: ☐ Denver  ☐ Other: _________________________________________________________________
Commissary Email Address: ____________________________________  Telephone Number: __________________________
Commissary Agreement: Start Date: ____________________________  End Date: ____________________________

Select the boxes below for what the business above will be using the commissary for:

☐ Refrigerated/Freezer storage  ☐ Grease Disposal  ☐ Potable water hose  ☐ Dish washing
☐ Non-refrigerated Food storage  ☐ Food preparation tables  ☐ Mobile unit storage  ☐ Cooking equipment
☐ Clean water/ water disposal  ☐ Ice machine  ☐ Food preparation sink  ☐ Cooling equipment

As owner/representative of this facility, I confirm that the operator above has permission to use my facility as a commissary for their business. I understand my responsibilities as a commissary operator under the rules for commissaries in Chapter 12 of the City and County of Denver’s Food Establishment Rules and Regulations, Chapter 23 of the Denver Revised Municipal Code.

❖ I will notify the Health Department if the vendor stops using this facility.
❖ I will maintain logs/records for when the operator uses my facility.
❖ I understand that not following the rules and regulations for commissaries may result in fines and I may lose my ability to act as a commissary.

I affirm that the above information is correct and true by signing below.

___________________________________________________________  ____________________________________
Signature of Commissary Operator       Date
Retail Mobile Food Establishment
Acknowledgement Letter

In an effort to inform operators of common issues that take place on mobile retail food establishments, the Department would like to advise you of the following requirements that, if not followed, may significantly increase the possibility of foodborne illness of your patrons and may result in enforcement action:

Operating Requirements:
- Hand washing sink with hot and cold water under pressure
  - Hot water must be at least 100°F within 30 seconds of activation for adequate hand washing
- Soap and single-use towels at all times
  - Hand sanitizer is not a substitute for hand washing
- Utilizing approved commissary when necessary for the following tasks, including but not limited to:
  - Food preparation and storage
  - Obtaining clean water and disposing of gray water
  - Washing and sanitizing dishes and equipment

I acknowledge and will adhere to all operating requirements

Instances Causing a Food Truck Closure
- Operating with an imminent health hazard includes, but is not limited to:
  - Operating without a means to properly wash hands
    - Including a functioning hand washing sink, adequate hot water, soap or paper towels
  - Selling food that is prepared and/or stored somewhere other than the approved commissary
    - Food for sale on the mobile unit must not be prepared and/or stored in a private home
  - Operating in any manner that seriously compromises the safety of foods served

I acknowledge and understand instances that may cause a closure of my food truck

Fines or Court Summons
1. Repeated critical violations of the same type in a 12-month period (fines up to $1000)
2. Lack of evidence of proper licensing (court summons)
   - Each food truck or cart shall be individually licensed
3. Operating with an imminent health hazard (a fine up to $2000)
4. Failure to comply with an order issued by the Department (court summons)

I acknowledge and understand instances that will cause me to receive a fine or court summons

As a representative, owner, or operator of a mobile food establishment within the City and County of Denver, I understand that I am responsible for complying with the City and County of Denver Food Establishment Rules and Regulations, Chapter 23 - Denver Revised Municipal Code, which can be found at www.denvergov.org/phi.

Food Truck/Trailer/Cart Name

Date

Your Name

Position with Business
Retail Mobile Food Establishment
Acknowledgement Letter (Visual)

Use your commissary for all mobile unit operations.
Mobile unit operations include: cooking, cooling, reheating, washing fruits/veggies, cutting, marinating, washing dishes, food storage and obtaining clean water/dumping wastewater

EXTRA TIP!
Fill your clean water tank at your commissary before you begin operating.
In colder months, empty your tank at night to prevent freezing.

You must have hot running water between 85°F - 120°F at all times.
Stock your sink with soap and single-use paper towels.

I acknowledge and understand the above situations may require my business to close.
I acknowledge and understand the above situations may result in my business receiving a fine.

______________________________  ________________________________
Food Truck/Trailer/Cart Name       Date

______________________________  ________________________________
Your Name                         Position with Business
Include Photos of Mobile Unit Below:

*Inside of Unit:* Include photos of cooking equipment, refrigerators, and sinks.

*Outside of Unit:* Passenger’s side, Driver’s side, Front, and Back (with license plate)