

2022 Mobile Retail Food Establishment Plan Review Application

If the following items within the Mobile Plan Review Packet are not completed, your packet will be denied upon submission.

- 1) Follow these [instructions](#) if you have propane on your unit to obtain and pay (\$185) 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.
- 2) Complete the Affidavit of Commissary (Appendix A)
 - a. You, the operator, completes the top section.
 - b. The commissary completes the bottom section.
- 3) Complete the Acknowledgement Letter (Appendix B)
- 4) Take clear, color photos of both the inside and outside of the mobile unit and print them on 8.5" X 11" computer paper. No more than 4 pictures per page. (Individual photos printed on photo paper *will not* be accepted). Phone template available in Appendix E
- 5) Complete all sections of the packet with a bracket (). If something is not applicable, please say N/A.

Warning: Operating without a retail food license may result in a court summons

2022 Mobile Retail Food Establishment Plan Review Application

Complete steps 1-5 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 OR TRUCKS 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:

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

Instructions

1. The following shall be gathered BEFORE submitting the application for review to Excise and Licenses:

- Government issued ID (driver's license, passport, military ID, etc.)
- Fees: \$200-application fee (non-refundable) and \$125-business license fee for a total of \$325 to be paid at time of submission.
- Completed **Propane Permit** or obtain **Letter of Exemption** from the Denver Fire Department.
- Copy of your registration and driver's license
- Affidavit of Commissary** with Business Operator and Commissary Operator sections completed.
- Mobile retail food establishment plan review application (pages 2-13, including appendices A and B)
 - Please reference Appendix C for questions with an asterisk (*)
- Printed, clear, color pictures of the following items printed on an 8.5" x 11" sheet of printer paper. Print 1 picture per page or utilize Appendix D (blurry, dark or pixelated pictures, and Kodiak pictures will not be accepted):
 - Clean water and wastewater tanks
 - Exterior of the unit: 1 picture of each side including permanent license plates, propane lines and tanks
 - Interior of the unit: sink(s), hood system, all equipment including sinks, propane lines, breaker box and fireextinguishers, etc.
- Manufacturer specifications (spec sheets) for all appliances including cooking equipment and refrigeration
NOTE: All equipment must be rated for use with propane. Natural gas appliances are *not* allowed
- If applicable, two (2) complete sets of pre-engineered automatic extinguishing system shop drawings

2. Email all items from step 1 to EXLSubmit@denvergov.org OR Bring all items from step 1 to the Department of Excise and Licenses (Dept. of EXL): 201 W Colfax Ave., Suite 206, Denver 80202

3. After submitting your plans to the Dept. of EXL, the following will take place:

- Dept of EXL will issue you a business file number (BFN)/record number
 - **Do not lose this number;** it is your tracking number for the licensing process
- Dept of EXL will distribute your plan review to applicable agencies for review
- 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)
- You will need to contact the Denver Fire Department (DFD) via email at dfdmobiles@denvergov.org to schedule your in-person fire safety inspection. This can be done simultaneously with DDPHE's review
- Once the 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 within 5 business days.

4. If operating on private property, a zoning permit from the Zoning Department and permission letter from the property owner will need to be obtained.

SECTION 1: Oath of Applicant

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I further acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Denver Revised Municipal Code and all Rules and Regulations which govern this Mobile Retail Food Establishment Plan Review Application:

Name (Print)

Authorized Signature

Title

Date

SECTION 2: Basic Information

Mobile Retail Food Establishment Trade Name:	
Legal Entity Name (LLC, Corp., Etc.)	
Mailing Address: (include city, state, zip)	
Phone:	Fax:
Email:	
Website/Facebook/Twitter Page:	
Responsible/Main Contact Name:	% interest owned:
Home Address: (include city, state, zip)	
Email:	Phone:
Partner's Contact Name:	% interest owned:
Home Address: (include city, state, zip)	
Email:	Phone:
Partner's Contact Name:	% interest owned:
Home Address: (include city, state, zip)	
Email:	Phone:
MOBILE FOOD ESTABLISHMENT VEHICLE INFORMATION	
Vehicle Identification Number (VIN):	
Make and Model of Vehicle:	Permanent License Plate #:
Was this unit previously licensed in the City and County of Denver?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what was the name of the unit:	

SECTION 3: Equipment Information

What type of sanitizing solution are you using for cleaning food contact surfaces*?

- Chlorine Quaternary Ammonium Other: _____

What strength shall your sanitizing solution measure in parts per million (PPM)*? _____ PPM

Are PPM test strips available on the mobile unit to verify sanitizer concentration? Yes No

What type of thermometer is available for use on the mobile unit*? Dial stem Digital

If your truck weighs more than 16,000lbs, do you have your DOT stickers? Yes No

Indicate, using numbers, how many pieces of equipment are on the unit: (ex: 1 hand washing sink, 2 Fryers, 1 Grill)

- | | | | |
|---------------------------|---------------------------|---------------------|----------------------|
| ___ Hand washing sink | ___ Flat top(s) | ___ Refrigerator(s) | ___ Steam table(s) |
| ___ Mop/Utility/Dump sink | ___ Fryer(s) | ___ Freezer(s) | ___ Vertical Broiler |
| ___ 3-Compartment sink | ___ Grill(s) | ___ Other: _____ | ___ Hot Box(es) |
| ___ Food preparation sink | ___ Stove (2/4/6 burners) | ___ Other: _____ | |

Are all the propane powered appliances rated for propane use? Yes No

Sink Basin Measurements*:

	Length (inches)	Width (inches)	Height/Depth (inches)
Hand Washing Sink			
Three-compartment Sink^			

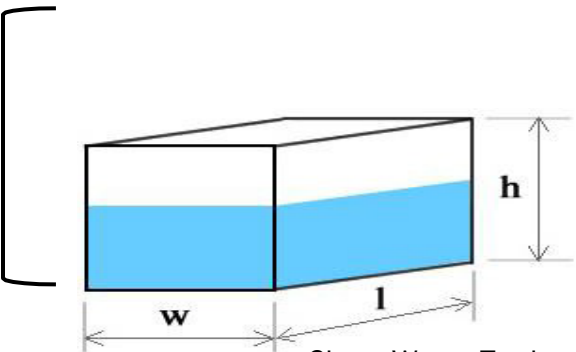
SECTION 4: Water Tanks

Water Tank Measurements----Write measurements in INCHES (Length: L, Width: W)

Clean water tanks must be a minimum of 10 gallons, or 3 gallons per hour of operation, whichever is greater. For example, if operating for 5 hours, a 15-gallon clean water tank, at minimum, is required. If operating for 2 hours at a time, a 10-gallon clean water tank would be required.

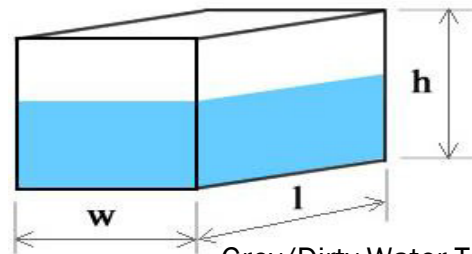
Wastewater tanks must be at least 15% larger than the clean water tank. For example, if the clean water tank is 15gallons, then the gray water tank must be at least 17.25 gallons.

Note: If multiple tanks are used for the clean water, they must be connected and allow for water to be pumped without changing tanks. A single tank must be used for wastewater.



Clean Water Tank Measurements (inches):

Width (w) _____
 Length (l) _____
 Height (h) _____



Grey/Dirty Water Tank Measurements (inches):

Width (w) _____
 Length (l) _____
 Height (h) _____

SECTION 6: Commissary Usage and Food Preparation

What is the name of the commissary you plan to use? _____

Please write the hours you intended to use the commissary under what days you intend to report to the commissary:

Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours	___to___	___to___	___to___	___to___	___to___	___to___	___to___

Name of supplier(s) where food will be purchased: _____

Where will ware washing be taking place? On the mobile unit At the commissary

I understand that water may only be obtained from my commissary: Yes No

How is the mobile food unit clean water tank filled? Food grade/drink water hose Other: _____

If applicable, who is providing the food grade hose? Commissary Self

If applicable, how will food grade hose be stored? Closed container Other: _____

If applicable, where will the food grade hose be stored? Commissary Mobile Unit

Where will wastewater (gray water) be disposed? Commissary Other: _____

How is wastewater drained from wastewater tank(s)? Hose Valve Other: _____

If applicable, where will grease/oil be disposed? Commissary Other:

Is the mobile unit only selling pre-packaged items (i.e. hot box truck, ice cream truck, etc.)? Yes No

If yes, are all pre-packaged items store-bought (i.e. ice cream bars, cupcakes, chips, soda)? Yes No

If any items on the mobile unit are *prepared prior to being sold* or *are not bought prepackaged*, please indicate where the following tasks will take place (select all that apply):

- Cooking Mobile unit Commissary Not Applicable
- Reheating Mobile unit Commissary Not Applicable
- Cooling Mobile unit Commissary Not Applicable
- Thawing Mobile unit Commissary Not Applicable
- Ice-making (not buying from store) Mobile unit Commissary Not Applicable
- Washing produce Mobile unit Commissary Not Applicable
- Slicing Mobile unit Commissary Not Applicable
- Cutting/Dicing Mobile unit Commissary Not Applicable
- Freezing Mobile unit Commissary Not Applicable
- Other: _____ Mobile unit Commissary Not Applicable
- Other: _____ Mobile unit Commissary Not Applicable

Where will the following storage be taking place (select all that apply):

- Cold storage Mobile unit Commissary Not Applicable
- Dry storage Mobile unit Commissary Not Applicable
- Freezer storage Mobile unit Commissary Not Applicable
- Chemical storage Mobile unit Commissary Not Applicable
- Other: _____ Mobile unit Commissary Not Applicable
- Other: _____ Mobile unit Commissary Not Applicable

I understand that no food can be stored and/or prepared in my home: Yes No

*Reference Appendix C

SECTION 7: Operating Location

Please write the hours of intended operation under what days you plan to operate during the week:

Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours	__to__	__to__	__to__	__to__	__to__	__to__	__to__

What months do you plan to operate: _____

Where do you plan to sell food? (please check all applicable boxes and complete information below checked box)

Single Location(s), such as breweries, a tire shop, parking lot, a meter downtown, office building, etc.^^

- 1) Ex: 17th and Wynkoop from 10am-2pm, Mon-Fri and Bob’s Brewery from 5-9pm Saturday
- 2) _____
- 3) _____
- 4) _____

^^If *privately owned*, please review zoning requirements. If *on a street*, please review public works requirements.

Route, where you go from location to location and make frequent stops during your operation hours

Operating Address(es)	Days of Operating	Hours of Operation
<i>Ex: Bob’s Plumbing at 40th and Steele</i>	<i>Monday-Friday</i>	<i>10:15-10:30 a.m.</i>

Event(s), such as Civic Center Eats, Taste of Colorado, Farmer’s Markets, etc.

Event Name	Operating Date(s)	Hours of Operation
<i>Ex: Civic Center Eats</i>	<i>Tuesdays (May-Oct)</i>	<i>11 a.m.-2 p.m.</i>

ADVISORY: Some Denver addresses are in unincorporated areas and therefore are regulated by different health departments and require their county’s license. Verify intended area of operation’s address prior to obtaining a Denver license. No other licenses are valid while operating in the City and County of Denver. **A City and County of Denver license is only valid in the City and County of Denver.** Operating without a proper license can result in a court summons.

SECTION 8: Miscellaneous

Is the trade name of the business on the exterior of the mobile unit? Yes No

Is there a phone number to contact the business on the exterior of the unit? Yes No

Where are the nearest restrooms to the intended area of operation that will be utilized by employees?

Name (of business):	
Address:	Zip
Name (of business):	
Address:	Zip

SECTION 9: Fire Extinguishing Equipment

- Do you use propane or a generator on the mobile unit? Yes No Not Applicable
- If using propane or generator, do you have a 2A 10BC fire extinguisher?* Yes No Not Applicable
 - If yes, was the extinguisher inspected by a licensed inspector? Yes No
 - If yes, is the extinguisher mounted and secured in the proper bracket?* Yes No
- Do you have equipment that produces grease-laden vapors or smoke?* Yes No Not Applicable
- If producing grease or smoke, do you have a Class K fire extinguisher?* Yes No Not Applicable
 - If yes, was the extinguisher inspected by a licensed installer? Yes No
 - If yes, is the extinguisher mounted and secured in the proper bracket?* Yes No
- If producing grease or smoke, do you have a commercial grade hood?* Yes No Not Applicable
 - If yes, does the hood extend over all required equipment? Yes No
 - If yes, was the hood system installed by a licensed inspector? Yes No
 - If yes, is the hood system caulked with high temperature caulking? Yes No
- If producing grease or smoke, do you have a fire suppression system?* Yes No Not Applicable
 - If yes, was the suppression system installed by a licensed installer? Yes No Not Applicable

What are the dimensions of your hood?*

Width (inches)	Height (inches)	Length (inches)

SECTION 10: Hot Water

- How is hot water supplied to the unit for handwashing or other activities?
- Hot water heater Passive System/ Heat Exchange Other: _____
- If water heater uses propane, is it vented to the exterior of the unit? Yes No Not Applicable

NOTE: If using a propane powered hot water heater, it must be rated for propane use only.

I understand that I must **ALWAYS** have hot water measuring 100F at my hand washing sink: Yes No

SECTION 11: Power Source

Power Source: (check all that apply)

- Electrical (plug into a building) Propane Generator Other: _____
If applicable, where is generator located? On unit Outside of unit (On ground)

How will the electrical source be grounded? _____

How many amps is the breaker box? _____

- Are all breakers labeled for the equipment they feed? Yes No Not Applicable
Is all electrical wiring contained within a rigid conduit?* Yes No Not Applicable
Are GFI circuits installed?* Yes No Not Applicable

SECTION 12: Propane

Interior

- What type of propane lines are used on the interior of the unit? Hard Flex
If flex lines are being used, what type of flex lines? _____
If flex lines are being used, where are they located? _____
If flex lines are being used, how long are they? _____
If flex, are the lines protected from sharp edges? Yes No Not Applicable
Are there shutoff valves on the interior of the unit? Yes No Not Applicable

Exterior

- Are propane lines piped on the exterior of the unit? Yes No Not Applicable
What type of propane lines are used on the exterior of the unit? Hard Flex
If flex lines are being used, where are they located? _____
If flex lines are being used, how long are they? _____
How many propane bottles are on the unit? One (1) Two (2) Other: _____
How much does **each** bottle weigh? 20 lbs 40 lbs Other: _____
How many **total pounds** of propane are on the unit? _____
How are propane bottles securely mounted? Cage Bracket Other: _____
What type of regulator do you have? Single Stage Dual Stage
Is the propane regulator securely attached to the vehicle? Yes No Not Applicable
Does the regulator have adequate space for venting? Yes No Not Applicable
How many appliances on the unit use propane? One (1) Two (2) Other: _____
If propane is not visible, is there a sticker indicating propane? Yes No Not Applicable

ADVISORY: If propane is used on the truck, apply and pay for your fire safety operational permit [online](#) PRIOR TO submitting the completed plan review to the Department of Excise and Licenses (Dept. of EXL).

If propane is NOT used on the truck, obtain an exemption letter from DFD PRIOR TO submitting plan review packet to the Dept. of EXL by emailing dfdmobiles@denvergov.org.

SECTION 13: Floor Plan Drawing (if available from manufacturer, please attach plans instead)

The following items shall be indicated on the floor plan drawing:

- Location and common name of all equipment
- Food storage locations [including coolers and self-service locations (i.e. salsa, soda, etc.), if applicable]
- Location of clean and gray water tanks
- Location of sinks (including hand washing and three compartment sink, if applicable)
- Location of propane tanks and propane powered equipment (indicate with a **P** on equipment)
- Any outdoor equipment (i.e. barbecue)



***NOTE:** All floors, walls and ceilings shall be constructed of smooth and easily cleanable materials.*

What material is the floor constructed of? _____

What material is the walls constructed of? _____

What material is ceiling constructed of? _____

Appendix A

2022 Mobile Affidavit of Commissary

Completed by Business Operator

Business Name: _____ Business LLC/CORP: _____
 Owner/Operator's Name: _____
 Operator's Mailing Address: _____ City: _____ State: _____ Zip Code: _____
 Operator's Email: _____ License Plate: _____
 Operator's Telephone Number: _____ CBD Products (Y / N)?: _____

Weekly Commissary Schedule (Put N/A on days you don't work at the commissary):

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
End Time							

When you registered your time at the commissary, what method do you use:

Sign-in sheet Electronic Punch Other: _____

As owner/representative of the above-named business, I offer this affidavit as proof that my food will be prepared in a licensed facility in accordance with the laws governing the designated business type in the City and County of Denver's Food Establishment Rules and Regulations, Chapter 23 of the Denver Revised Municipal Code. Please initial below:

_____ I will submit a new affidavit for approval **before** I resume selling food if I cease to use the facility listed below as my commissary.
 _____ I understand that all food must be stored and prepared at the commissary below; **no** food may be stored or prepared in a home.
 _____ I understand that failing to utilize my commissary as required may result in enforcement action.

Note: If you are operating multiple stands/booths/mobiles, such as Suzy's Lemonade #1 and Suzy's Lemonade #2, you will need to obtain separate licenses for each and submit separate affidavits to the department for approval.

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

 Signature of Proposed Business Operator _____
Date

Completed by Commissary Operator

Commissary Name: _____ Operator's Name: _____
 Commissary Address: _____ Telephone Number: _____
 Commissary is regulated by: Denver Jefferson County Tri-County Other: _____
 Commissary Email Address: _____
 Commissary Agreement: Start Date: _____ End Date: _____

Commissary is providing the following items for the above noted operator/business:

Cold storage Grease Disposal Drinking/potable water hose Dish washing
 Dry 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 utilize my facility as a commissary for their designated business. I read, understand, and affirm my responsibilities as a commissary operator in accordance with the laws governing 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. Please initial the lines below:

_____ I will notify the Department of Public Health and Environment if the vendor ceases to use this facility as required.
 _____ I will maintain logs/records indicating both the intended schedule as well as the actual schedule in which the above operator uses my facility.
 _____ I understand that failing to adhere to the rules and regulations that govern commissaries may result in enforcement action.

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

 Signature of Commissary Operator _____
Date

2022 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:

- 1) Hand washing sink with hot and cold water under pressure
 - a. Hot water must be at least 100⁰F within 30 seconds of activation for adequate hand washing
- 2) Soap and single-use towels at all times
 - a. Hand sanitizer is not a substitute for hand washing
- 3) Utilizing approved commissary when necessary for these following tasks, including but not limited to:
 - a. Food preparation and storage
 - b. Obtaining clean water and disposing of gray water
 - c. 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/Cart Name

Business File Number (BFN)

Date

Your Name

Position with Business

2022 Retail Mobile Food Establishment Acknowledgement Letter (Visual)

Do not use your house for anything related to Your food truck! (storage, preparation, cooking)
You must use your commissary for everything!



You must have hot water between 100-120F at all times!
Don't operate if you do not have hot water!



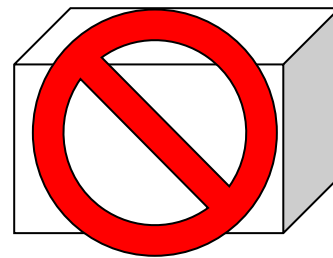
You must have sanitizing solution prepared while operating.
Do not put soap into your sanitizing solution!
Quaternary Ammonium (150-400ppm) or Bleach and Water (50-200ppm)



You must have full water tanks to operate. If you do not have water, do not operate!



Full tank: Good



Empty Tank: Bad

_____ ***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/Cart Name

Business File Number (BFN)

Date

Your Name

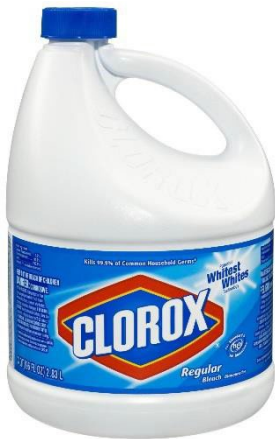
Position with Business

Appendix C Sanitizing Solution

In Place Sanitizing Solution shall be mixed at a proper concentration and shall be ready to be used to wipe down food contact surfaces such as cutting boards and tables during any food handling.

Sanitizing Chemicals

Chlorine (Bleach)



Quaternary Ammonium



Test Strips

Chlorine (Bleach)



Quaternary Ammonium



Sanitizer Concentration*

Chlorine (Bleach): *50-200 ppm*

Quaternary Ammonium: *150-500 ppm*

**Sanitizing concentration shall be mixed per manufacturer's instructions. Provided concentrations are an example of the concentration range for each product.*

Thermometer

Temperature measuring devices shall be capable of reading both hot and cold temperatures, shall have a numerical scale, printed record, or digital readout in increments not greater than 2°F (1°C) that includes the range of 0-220°F, and shall be accurate to +/- 2°F of 32°F (1°C). Temperature measuring devices shall be capable and used to determine required Food temperature(s).

Digital Thermometers



Dial Stem



Grease Producing/Smoke-laden Vapor Producing Equipment

These are common examples of grease producing and smoke laden vapor producing equipment and do not include all equipment that requires a hood. If you are unsure whether a hood is required, contact the appropriate department for clarification.

Note: Ensure that all equipment is propane powered and *not* natural gas powered.

Flattop



Vertical Broiler



Fryer

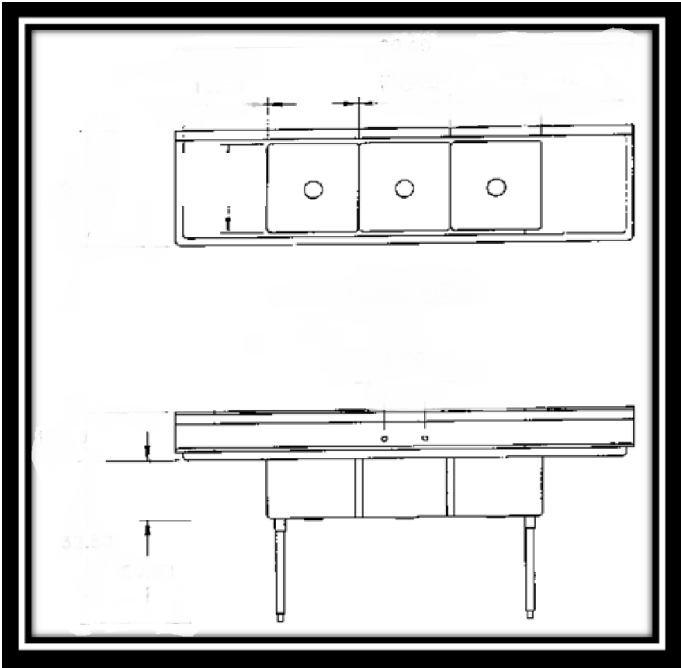


Stove

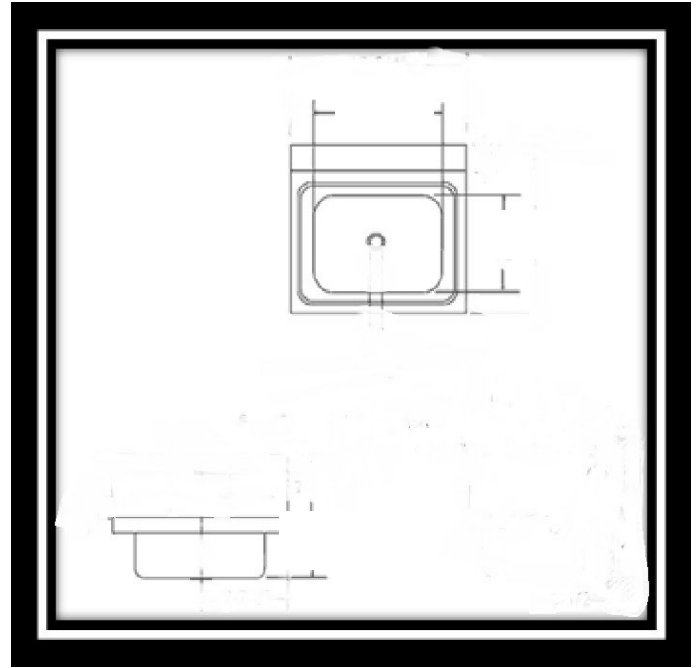


Sink Measurements

Three Compartment Sink



Hand washing sink



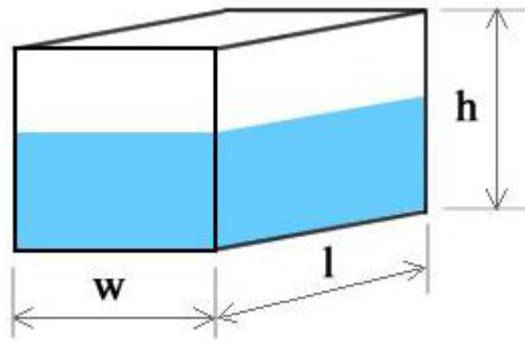
How to complete the sink measurements (example):

	Length (inches)	Width (inches)	Depth/Height (inches)
Hand washing Sink	12 inches	10 inches	6 inches
Three Compartment Sink*	18 inches	18 inches	12 inches

*Provide the dimensions of *one of the compartments* of the three-compartment sink.

Water Tank Measurements

Standard rectangular tank



Example water tank calculations for rectangular tank:

	Length (inches)	Width (inches)	Height (inches)	Total Gallons
Clean Water Tank	20 inches	15 inches	13 inches	16.88 gallons
Wastewater Tank	25 inches	20 inches	13 inches	28.14 gallons
How to calculate: http://www.calculatorsoup.com/calculators/construction/tank.php*				

Water Tank Math:

Length*Width*Height = Total gallons
 Total gallons/231 = Water tank size

Example:

20*15*13 = 3900 gallons
 3900/231 = 16.88 gallon tank

Wastewater tank must be 15% larger than clean water tank

How to verify wastewater tank is 15% larger:

Clean water tank total gallons*1.15 = Required wastewater tank size

Example:

Required wastewater tank = 16.88*1.15 = 19.41 gallons
Current wastewater tank size = 28.14 gallons
 28.14 > 19.41 therefore, **wastewater tank is large enough**

***Note:** For other shaped water tanks, please provide manufacturer’s dimensions and use the link above to determine gallon size

Fire Extinguishers



2A 10BC



Class K

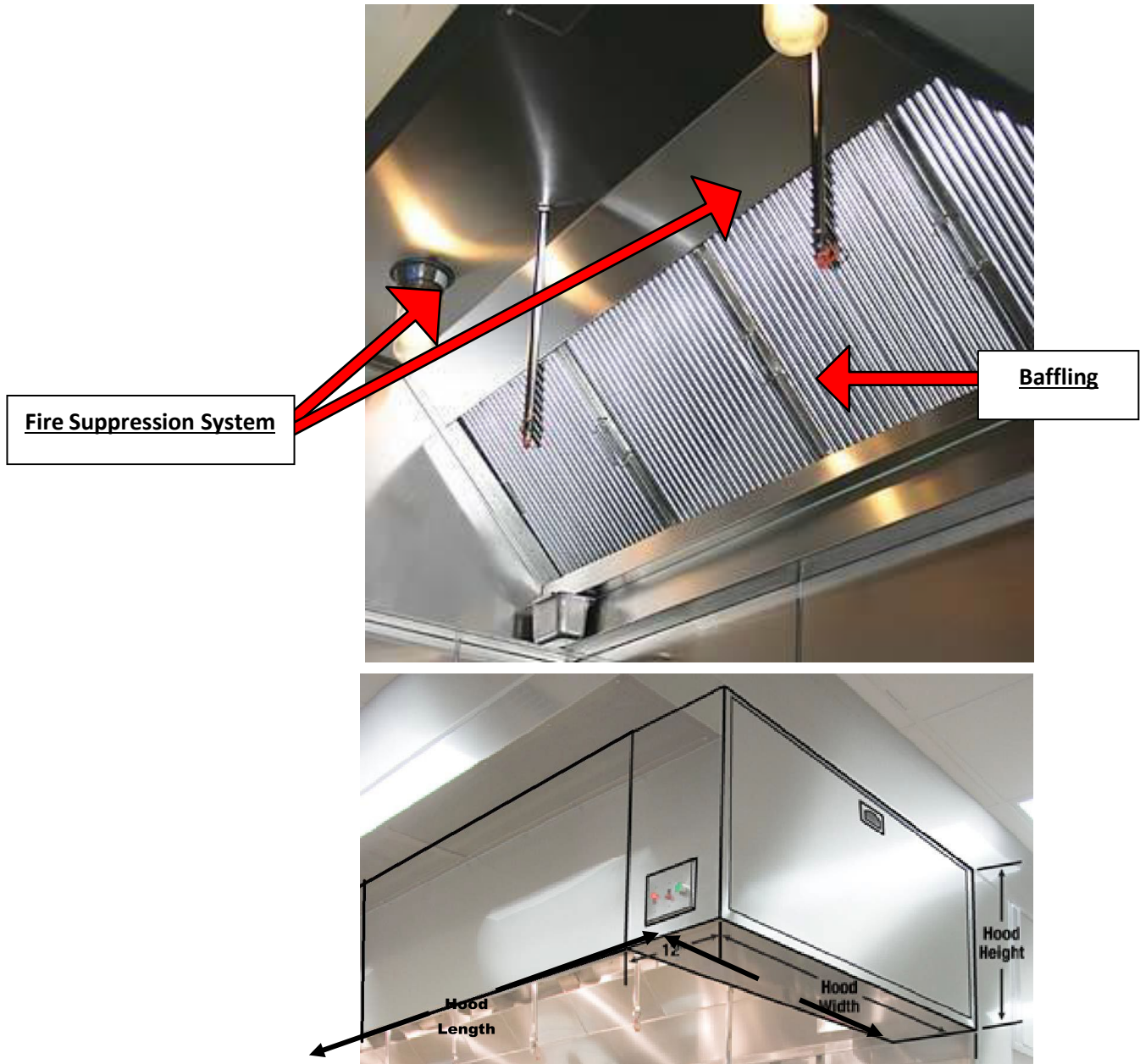


Bracket

Basic Fire Department Requirements for Fire Extinguishers:

1. All food trucks and/or carts shall have an approved fire extinguisher that has been inspected on a yearly basis by a Denver Fire Department licensed fire extinguisher company or,
2. Fire extinguishers bought from a retail store shall have the receipt showing the date of purchase. This extinguisher is good for one year and can then be inspected annually by a licensed inspector.
3. Fire extinguisher shall be a minimum of 2A: 10BC Classification that is mounted to the vehicle in the appropriate bracket.
4. Any solid fuel cooking (including but not limited to wood or wood pellets) shall have a Class K rated fire extinguisher AND a minimum 2A: 10BC class Dry Chemical extinguisher that is mounted to the vehicle in an appropriate 2A: 10BC bracket.

Hood and Fire Suppression System



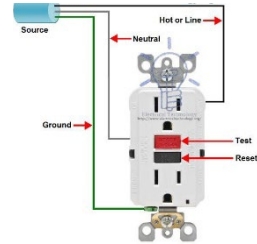
Basic Fire Department Requirements for Hood and Fire Suppression Systems:

1. All hood extinguishing systems shall be inspected every six months by a Denver Fire Department licensed inspection company.
2. Any cooking or re-heating operations that produces grease laden vapors (Including but not limited to Frying of any type) will be required to have a Class I hood installed with an approved Fire Suppression System and a Class K fire extinguisher will also be required to be mounted to the vehicle in an appropriate Class K bracket.

Power Source



Rigid Conduit



GFI Circuits



Single Regulator



Dual Regulator



Single Propane Tank



Propane Tanks with Dual Regulator



Propane Bracket



Propane Cages/Boxes

Propane Tank Size Limits	
Maximum weight per unit	80lbs
Maximum weight per propane tank	40lbs
Maximum propane tanks per unit	2

Basic Fire Department Requirements for Propane:

1. The top of the cage must have a solid cover to protect tank valve.
2. Propane tanks shall be mounted securely to truck or cart by metal strap and must be protected from vehicle impact. Bungee cords and fabric tie down straps are not acceptable to secure Propane tanks (contact the Denver Fire Department for applicable requirements).
3. All propane lines must be installed in accordance with Denver Fire Department policy and NFPA requirements (contact the Denver Fire Department for applicable requirements)

Appendix D
Photo Template

Outside of Unit

<u>Front</u>	<u>Passenger's Side</u>
<u>Back (including license plate)</u>	<u>Driver's Side</u>

Inside of Unit

From Front

From Back

Clean Water Tank

Wastewater Tank