

**PINAL COUNTY DIVISION OF
ENVIRONMENTAL HEALTH
P.O. Box 2517, Florence, AZ 85232-2517
(520) 866-6864 or toll free 1 (866) 287-0209
Fax: (520) 866-6007**

CONSTRUCTION AND OPERATION GUIDELINES FOR PUSHCARTS

1. GENERAL

- A. **“Pushcart”** means and refers to a non-self-propelled vehicle limited to the serving of non-potentially hazardous foods or commissary-wrapped foods maintained at proper temperatures, or limited to the preparation and serving of frankfurters. Unpackaged non-potentially hazardous food items approved for sale from a pushcart shall be limited to popcorn, nuts, produce, pretzels and similar bakery products and snow cones.
- B. All persons selling food products from a pushcart must obtain a permit from Pinal County Division of Public Health. A permit application may be obtained at 31 N. Pinal Ave., Bldg. F, Florence, AZ from 8:00 a.m. - 4: 30 p.m. Monday thru Friday. Please call (520) 866-6864 for more information.
- C. Detailed plans and specifications must be submitted and approved prior to construction of the pushcart. A plan review fee must be paid at the time the plans are submitted for review.

2. CONSTRUCTION

- A. Provide a handwashing lavatory at least 9" wide, 9" long, and 5" deep with hot and cold water supplied through a mixing type faucet. A two-compartment sink set-up that meets NSF standards for food carts will also be accepted.
- B. Provide a potable water storage tank of at least a 5-gallon capacity.
- C. Provide a waste water storage tank with 15% larger capacity than the fresh water tank. (7.5 gallons minimum).
- D. The business name must be indicated on both sides of the pushcart in letters that are at least 3" high and 3/8" wide. No cardboard, marking pen, magnetic or similar temporary signs will be approved.
- E. All containers, racks and bins must be easily cleanable and of durable construction.

- F. When construction is complete you must bring the cart (and signed commissary agreement) to this office for an inspection. Cart must be clean and all equipment operational. If construction and operational requirements are met, you will be issued your permit to operate. At that time you must pay the appropriate annual permit fees.

3. OPERATION

- A. An approved commissary must be maintained for the storage of food, cleaning of the equipment and utensils, filling fresh water tank and emptying of waste- water holding tank. The operator must report with the cart to the commissary at least daily. See separate commissary information.
1. All food items must be obtained from an approved source.
 2. Proper food temperatures must be maintained at all times:
Hot---130°F or Above Cold--- 41°F or Below
- B. All food containers must be equipped with tight fitting covers. These covers must be kept closed except when food is being prepared.
- C. Proper utensils or disposable plastic gloves must be used to handle all ready to eat foods. During operation, utensils should be stored in the food product with handles up or stored clean and dry.
- D. A supply of hand soap, paper towels, and approved sanitizing solution (e.g. 1 TBSP. of bleach to 1 qt. of water in a spray bottle) must be on the cart at all times.
- E. Iced storage units must be self-draining to prevent food from being submerged in melted ice water.
- F. Provide a metal stem type dial thermometer with scale reading 0°F - 220°F in 2° increments.

ADDITIONAL REQUIREMENTS FOR ESPRESSO/CAPPUCCINO CARTS

1. Refrigerator units must meet NSF standards or equivalent and must maintain all potentially hazardous foods at 41° F or below.
2. Milk may only be served as an ingredient to the coffee product. Milk must be provided from a commercially filled container of not more than ½ gallon capacity. No other open dairy product may be served from the cart.
3. No other tables or stands may be added to the cart operation. All sales must be from the cart.

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COMMISSARY AGREEMENT

I agree to report to the commissary facility listed below each operational day for all supplies and for all cleaning and service operations, including filling water tanks, disposal of waste water, cleaning of equipment and utensils, and storage of supplies. I further agree to obtain all supplies from an approved source.

OWNER (of mobile unit) _____
(Please Print)

SIGNATURE _____

DOING BUSINESS AS _____

I agree to provide commissary services for the above mobile food service operator.

BUSINESS NAME: _____
(of commissary)

OWNER OR MANAGER: _____

STREET ADDRESS: _____

CITY: _____

PHONE NUMBER: _____

HEALTH DEPT. PERMIT NUMBER: _____

SIGNATURE: _____

TITLE: _____

DATE: _____