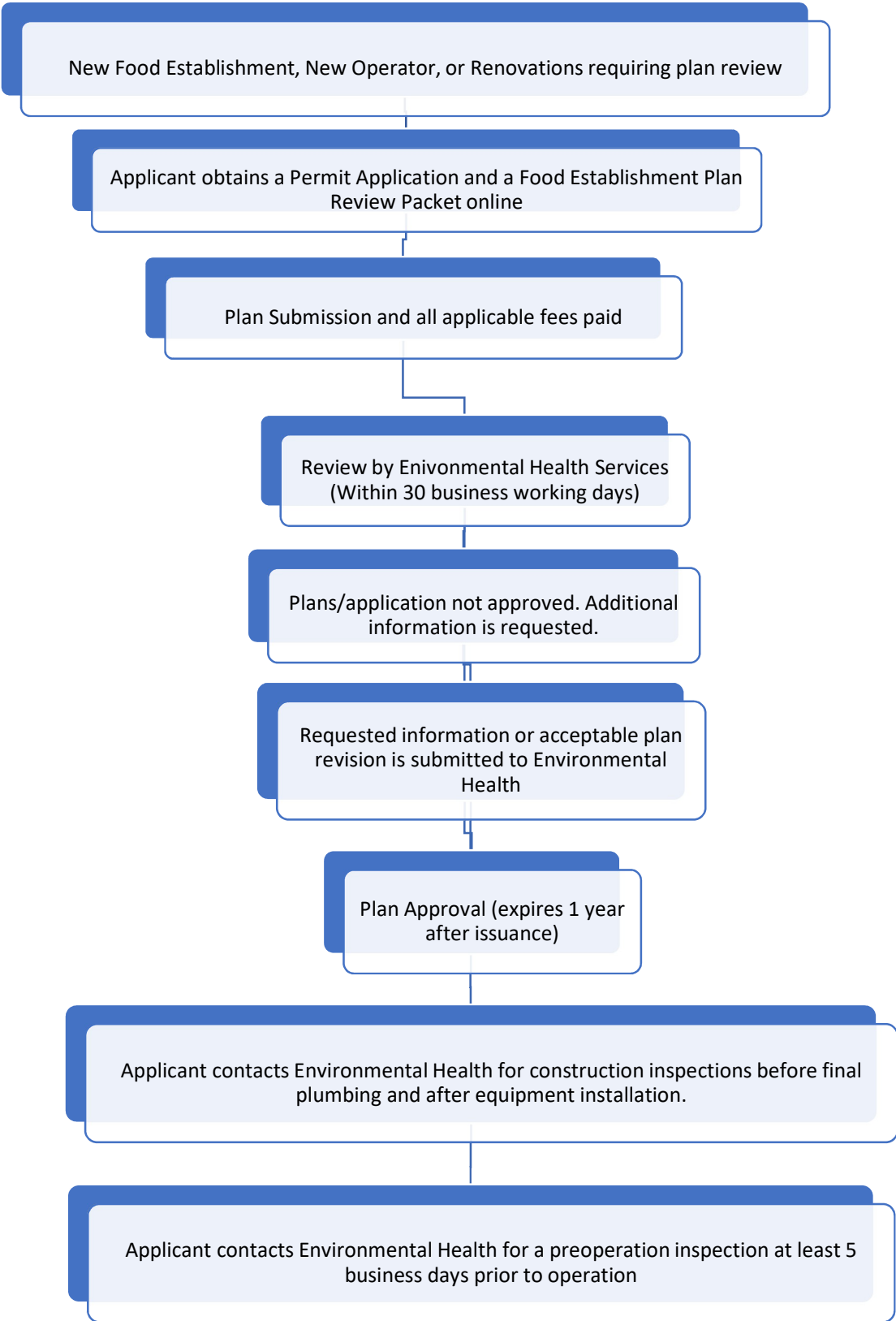


NAVAJO COUNTY FOOD ESTABLISHMENT PLAN REVIEW PACKET
PLAN REVIEW PROCESS FLOW CHART



Navajo County Plan Review Application for Mobile Food Units

TYPE OF APPLICATION: <input type="checkbox"/> New <input type="checkbox"/> Existing within State		Projected Start Date: _____	
		Projected Completion Date: _____	
TYPE OF FOOD OPERATION: <input type="checkbox"/> Type I <input type="checkbox"/> Type II <input type="checkbox"/> Type III (See next page for Details)			
FOOD ESTABLISHMENT INFORMATION			
Name of Establishment: _____			
OWNERSHIP INFORMATION			
Name of Owner: _____			
Address: _____		City: _____	State: _____
Email: _____		Phone Number: _____	
APPLICANT INFORMATION (e.g., ARCHITECT/ENGINEER)			
Applicant Name: _____		Contact Person: _____	
Applicant Mailing Address: _____		City: _____	State: _____
Email: _____		Phone Number: _____	
MOBILE FOOD OPERATION INFORMATION			
Hours/Days of Operation <input type="checkbox"/> Sun: _____ <input type="checkbox"/> Mon: _____ <input type="checkbox"/> Tues: _____ <input type="checkbox"/> Wed: _____ <input type="checkbox"/> Thurs: _____ <input type="checkbox"/> Fri: _____ <input type="checkbox"/> Sat: _____	Size of Fresh Water Tank _____ Size of Grey Water Tank _____	Type of Service (check all that apply) <input type="checkbox"/> On-site consumption <input type="checkbox"/> Off-site consumption <input type="checkbox"/> Catering <input type="checkbox"/> Single-use utensils <input type="checkbox"/> Multi-use utensils <input type="checkbox"/> Other: _____	Employees Max per shift: _____ Maximum meals to be served <input type="checkbox"/> Breakfast _____ <input type="checkbox"/> Lunch _____ <input type="checkbox"/> Dinner _____
The following documents must be submitted along with this plan review application for <u><i>New Arizona Mobile Food Units</i></u> : <input type="checkbox"/> Navajo County Application, permit (\$200) and plan review fees (\$150); <input type="checkbox"/> Commissary Application; <input type="checkbox"/> Proposed menu or complete list of food and beverages to be offered; <input type="checkbox"/> Provide a copy of Certified Food Manager certificate and food handler cards; <input type="checkbox"/> Vending Route; <input type="checkbox"/> Floor plan of the mobile to include location of the following if applicable: <ul style="list-style-type: none"> • Handwashing, ware washing, and food preparation sinks; • Refrigeration and cooking equipment; • Ventilation equipment; • Grey and fresh water tanks; and • Location of entrance and exits including screened windows. 			
The following documents must be submitted along with this plan review application for <u><i>Existing Arizona Mobile Food Units</i></u> : <input type="checkbox"/> Navajo County Application and permit fees (\$200); <input type="checkbox"/> Copy of Current County Permit; <input type="checkbox"/> Commissary Application; <input type="checkbox"/> Proposed menu or complete list of food and beverages to be offered; <input type="checkbox"/> Provide a copy of Certified Food Manager certificate and food handler cards; and <input type="checkbox"/> Vending Route.			
Signature: _____			Date: _____
Print Name: _____		Title: _____	

Types of Annual Licenses/Fee Schedule for Arizona Mobile Food Type

Type	Annual Fee	Operation Requirements
Type I Limited Risk	\$200	Limited Preparation: <ul style="list-style-type: none"> • Pre-packaged potentially hazardous foods • Ice cream • Samples • Coffee • Dispenses non-potentially hazardous food from packaged containers, such as pouring carbonated drink into a cup
Type II Moderate Risk	\$200	Moderate Preparation: <ul style="list-style-type: none"> • The food prepared in the facility is pre-cooked and simply reheated and requires minimal assembly • Hot or cold food prep in the facility is restricted to same day service • Foods requiring preparation in the facility are from approved offsite processing facilities. • Foods can include hot dogs, smoothies, coffee drinks, deli sandwiches, snow cones
Type III High Risk	\$200	High Risk Preparation: <ul style="list-style-type: none"> • The facility prepares food from a raw state to cooked • Food is prepared on the same day of service • Foods requiring preparation in the facility are from approved offsite processing facilities. • Foods can include hamburgers, chicken, turkey, steak, Mexican food, Greek food, ethnic food, Fish
Plan Review	\$150	For new Arizona Mobiles that do not have a permit in another Arizona County.
Note: Based on the Arizona Administrative Code Title 9 (R9-8-110), A Commissary is required for all Types of Mobile vendors.		

LICENSING TIME FRAMES

Pursuant to A.R.S. § 11-1605, Navajo County Public Health District has established timeframes for each type of license (permit) that it reviews. The overall time frame for each type of permit states separately the administrative completeness review time frame and the substantive review time frame.

Review time frames may be temporarily suspended under the following circumstances provided by A.R.S. § 11-1605.

1. Temporary suspension for public hearings.
2. Temporary suspension for state or federal approvals of licenses (permits).
3. Temporary suspension to wait for the applicant to submit additional information as requested by Navajo County.

Applications that have been inactive for more than one year since the date of a suspension notice will be administratively closed.

Navajo County has considered several factors including, staffing and budgetary constraints, and the overall complexity of the licenses that we issue in formulating these time frames. These time frames may be subject to modification in accordance with state statutes. These time frames include Navajo County’s review time and not the time the applicant takes responding to notices of deficiencies for either the administrative or substantive review.

An applicant may receive a clarification from the county of its interpretation or application of a statute, ordinance, regulation, delegation agreement or authorized substantive policy statement as provided in section A.R.S. § 11-1609.

Table 1. Licensing Time-frames (in days)

Type of Approval	Overall Timeframe	Administrative Completeness Review Time-frame	Substantive Review Time-frame
Approval of Environmental Health Services Permit (when plans are not required)	60	30	30
Approval of Variance under FC § 8-103.10	90	30	60
Approval of Plans and Specifications under FC § 8- 201.11	90	30	60
Approval of HACCP Plan under FC § 8-201.13	90	30	60