

IOWA DEPARTMENT OF INSPECTIONS AND APPEALS

Food and Consumer Safety Bureau

Telephone: (515) 281-6538

APPLICATION FOR MOBILE FOOD UNIT/PUSHCART LICENSE

License Fee: \$27.00

Mail completed application to:

Iowa Department of Inspections and Appeals
Food and Consumer Safety Bureau
Lucas State Office Building
Des Moines, Iowa 50319-0083

Date of Application: _____

Type of Application: [] New [] Renewal

Has ownership changed since last license issued? [] Yes [] No

If yes, give previous owner and business name: _____

Last License Number: _____

Name of Business: _____

Owner's Name: _____ Telephone Number: (____) _____

Street or P.O. Box: _____ County: _____

City: _____ State: _____ Zip Code: _____

Mailing address for all correspondence, if different than above:

Street or P.O. Box: _____ Telephone Number: (____) _____

City: _____ State: _____ Zip Code: _____

Iowa Code section 137F.1 defines a "mobile food unit" as: a food establishment that is readily movable, which either operates up to three (3) consecutive days at one location or returns to a home base of operation at the end of each day.

"Pushcart" means a non-self-propelled vehicle food establishment limited to serving nonpotentially hazardous foods or commissary-wrapped foods maintained at proper temperatures, or limited to the preparation and serving of frankfurters.

Please list the name and address of the home base for the mobile food unit or pushcart:

Name: _____

Address: _____

Is this site licensed as a Food Service Establishment or a Retail Food Establishment? [] YES [] NO

If yes, provide the Food Service Establishment or Retail Food Establishment license number: _____

License Fee Structure: \$27.00

Any Change in Location or Ownership Requires a New License.
Licenses are Not Transferable. Make Check or Money Order Payable to:
Iowa Department of Inspections and Appeals

Signature of Applicant: _____

Title of Applicant: _____

For Office Use Only
Date \$ Ck #