

**Mobile Food Unit Application****Notice:**

1. This permit is optional and serves only as proof of a fire code inspection. It does not serve as an inspection for the United States Department of Transportation, Tennessee Department of Transportation, Tennessee Department of Health, or any locally required non-fire code inspection.
2. The permit is only for the vehicle and equipment therein. It is not an approval of the location of the vehicle or that it meets local requirements for operation location.
3. The permit expires one (1) year after issuance.
4. The permit becomes invalid if the cooking equipment changes and alters the fuels, fire suppression system, hood requirements, or other safety requirements.
5. A copy of the menu must be included with this application.
6. Documentation of a fire extinguisher, fire suppression service, and hood inspection and cleaning must be available at the inspection. Failure to provide necessary documentation will result in a failed inspection.

**Business Name:** \_\_\_\_\_ **Date of Application:** \_\_\_\_\_**Type of Cooking:** (check all that apply)

- ☐ Deep Frying    ☐ Warming Pre-Cooked Meats    ☐ Cooking Raw Meats  
☐ Cooking Vegetables in Oil or Butter    ☐ Pizza Baking    ☐ Stir Frying    ☐ Baking  
☐ Boiling    ☐ Cooking Batter in Oil or Butter    ☐ Smoking    ☐ Pressure Cooking  
☐ Other: \_\_\_\_\_

**Cooking Equipment:** (check all that apply)

- ☐ Griddle    ☐ Grill    ☐ Oven    ☐ Range    ☐ Deep Fryer  
☐ Salamander    ☐ Broiler    ☐ Pizza Oven    ☐ Steaming Equipment  
☐ Conveyor Oven    ☐ Skillet    ☐ Pressure Cooker  
☐ Other: \_\_\_\_\_

**Cooking Fuel:** (check all that apply)

- ☐ Electric    ☐ Propane or other flammable gas    ☐ Solid Fuel (charcoal, wood, etc.)  
☐ Other: \_\_\_\_\_

**Other Equipment:** (check all that apply)

- ☐ Generator    ☐ Fire suppression system  
☐ Type 1 Kitchen Hood (smoke and grease laden vapors)  
☐ Type 2 Kitchen Hood (other purposes such as steaming, boiling, or dishwashing)

**State of Tennessee**  
**Mobile Food Unit Application**

**Vehicle License Plate Number:** \_\_\_\_\_ **VIN:** \_\_\_\_\_

**Owner's Information**

President / Owner(s) Name: \_\_\_\_\_

Street Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

**Operator's Information (if different than Owner)**

Operator's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

**Location of Operation**

☐ The unit will remain at a permanent location. If so, provide the address below:

Street Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

☐ The unit will move to various locations

**Preferred Region for Inspection:** ☐ West ☐ Middle ☐ East

**State of Tennessee**  
**Mobile Food Unit Application**

**CERTIFICATION**

I certify that the information provided herein to the State Fire Marshal's Office is accurate and complete. I understand that I shall immediately notify the Tennessee State Fire Marshal's Office if any changes are made to the information in this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date

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**RESERVED FOR OFFICIAL USE**

☐ Annual Permit (\$300)      ☐ card ☐ check ☐ certified funds ☐ other (\_\_\_\_\_)

☐ Re-inspect Fee (\$150)      ☐ card ☐ check ☐ certified funds ☐ other (\_\_\_\_\_)

This application is ☐ **approved** ☐ **denied**

Permit Number: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Department Signature

Approved the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_