

Mobile Unit Plan Review Reciprocity Checklist



Mobile Unit Name _____

Mobile Units that are permitted in another county may use this checklist to prepare a complete plan review reciprocity application. Check off items as you complete them. Make a copy of your plan review packet for your records. Submit a processing fee and completed checklist with the required documents. Fees are non-refundable.

✓	#	Item	Description	Office Use Only
	1	Application	Provide completed Food Establishment Application form. Include a copy of your Washington State Business License.	
	2	Approved Plan Review Documents	Provide the following approved plan review documents from the health department who currently permits your mobile unit (WAC 09115). <ul style="list-style-type: none"> <input type="checkbox"/> Menu and food preparation steps <input type="checkbox"/> Mobile unit floor plan <input type="checkbox"/> Mobile unit equipment list <input type="checkbox"/> Mobile unit finish schedule <input type="checkbox"/> Source of water and on-board plumbing specifications <input type="checkbox"/> Wastewater disposal site <input type="checkbox"/> Employee restroom location <input type="checkbox"/> Operating procedures <input type="checkbox"/> Cleaning schedule 	
	3	Commissary, Servicing Area or Exemption	Provide the approved Commissary, Servicing or Exempt Agreement.	
	4	Photos	Provide exterior photos of the mobile unit with the business name visible.	
	5	Location Plan	Provide a description of how your customers will find your location. If social media sites are used, provide the site address.	
	6	Approval Letter	Provide a copy of the approved plan review letter. Note: Variances are not transferrable.	
	7	L&I Approval	Provide a copy of the L&I approval for the mobile unit or a picture of the L&I tag applied to your mobile unit.	
	8	Current Permits	Provide a copy of the valid permit for the mobile unit.	
	9	Inspection Report	Provide a copy of the most recent mobile unit routine inspection report from the primary county that demonstrates compliance with food safety standards. A preopening inspection does not meet this requirement. <ul style="list-style-type: none"> <input type="checkbox"/> 	
	10	Additional Commissary	A secondary commissary is required if original commissary plan of operation is not able to be followed.	
	11	Processing Fee	A processing fee is required to submit your application.	

I understand I cannot open this food establishment until I have received written approval from Tacoma-Pierce County Health Department, obtained all operating permits and have been inspected and approved by all applicable city, county and state agencies. Plan review reciprocity is not transferrable to a new owner.

Signature _____ Title _____ Date _____