HENRY COUNTY BOARD OF HEALTH
407 S. WHITE STREET
MT. PLEASANT, IA 52641
319-385-6724

APPLICATION FOR MOBILE FOOD UNIT/PUSHCART LICENSE

License Fee: $27.00 *Make Check or Money Order payable to:*
Henry County Board of Health
407 S. White Street
Mt. Pleasant, IA 52641

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: _____

Any Change in Location or Ownership Requires a New License.
Licenses are **Not** Transferable. Make Check or Money Order Payable to:
Henry County Board of Health

Signature of Applicant: _____

Title of Applicant: _____

For Office Use Only		
Date	$	Ck #