

MOBILE FOOD PREPARATION VEHICLE PERMIT
TOWN OF RIVERHEAD FIRE MARSHAL
4 W Second Street, Riverhead New York 11901 (631) 727-3200 x601

Tax Map No. (FM use only): _____

Date of Application: _____ Fee: * \$100 Permit No. (FM use only): _____
* Please make checks payable to Town of Riverhead

PART 1: Applicant Information:

Name of Business: _____

Business Owner Name: _____ Daytime Phone No.: _____

Street Address: _____

Mailing Address (if different): _____

Associated Property (if different from applicant): _____ Tax Map # _____

Contact Person - Name: _____ **Phone No.** _____

Email Address: _____

PART 2: Vehicle Information:

Type of Vehicle Truck Trailer Other

Make/Manufacturer: _____ Model.: _____

Year: _____ State of Registration: _____ License Plate: _____ VIN: _____

Was Vehicle Originally Constructed as MFPV? _____ If No, what year was it converted? _____

Cooking Appliance Fuel: LPG Electric Wood CNG Other

Fixed Extinguishing System: Yes No Vent Hood System: Yes No

Town of Riverhead Clerks Office Peddler Permit Number: _____

SIGNATURE OF APPLICANT (ALL PERMITS)

The accuracy of the information, plans, diagrams and other facts submitted in conjunction with this application are the responsibility of the applicant. Any false statement made herein is punishable as a misdemeanor, pursuant to Section 210.45 of the New York State Penal Law. This applicant hereby grants permission to Town of Riverhead Fire Marshal to conduct a fire safety inspection in accordance with Fire Prevention Code of State of New York.

Signature of Applicant _____ Date: _____

Additional Information on required documentation on Page 2

Mobile Food Preparation Vehicle Inspection Checklist

Below please find the items that will be required to be submitted at the time of application and time of inspection:

- Proof of Valid Vehicle Inspection (submit with application)
- Proof of Valid Vehicle Registration (submit with application)
- Proof of Current Insurance (submit with application)
- Current Town of Riverhead Clerks Office Peddler Permit (submit with application)
- Current Suffolk County Health Department Permit (submit with application)
- LPG/CNG gas lines shall be inspected and pressure tested annually
- 200 lbs. Maximum of LPG (Propane)
- LPG Cylinders Secure and Protected from Damage
- Generator Fuel Source Protected and Secured (if applicable)
- LPG (Propane) Tanks shall be within Date – No Rust, Chipped Paint or Damage etc.
- Automatic Fixed Extinguishing System (if applicable) tagged and inspected within 6 months
- Hood and Duct in Place and Cleaned within 6 months or as needed
- Maximum 120 gal. of Cooking Oil, Labeled and Properly Stored
- Carbon Monoxide Detection in place and operational
- LPG/Explosive Gas Detection in place and operational (if applicable)
- All Electrical Wiring installed as per National Electric Code; no electrical hazards ie. Extension Cords in lieu of permanent wiring, Open Junction Boxes etc.
- Class K Fire Extinguisher within the cooking area; inspected within 1 year
- One 3A 40B:C (Minimum) or Two 2A 10B:C; Fire Extinguisher present, away from Cooking Area, Inspected within 1 year