



Solon Fire Prevention Bureau

5595 Harper Road
 Solon, Ohio 44139
 Office: (440) 337-1482

Mobile Food Unit Inspection Form

Mobile Food Unit Name: _____

Type of Unit: (Circle One) [Motorized Vehicle] [Trailer] [Hand Propelled Cart] [Other _____]

Company Address: _____

Contact Person: _____ Cell Phone Number: _____

Mobile Food Unit Definition: *Any apparatus or equipment that is used to cook, prepare or serve food, and that routinely changes or can change locations and is operated from a moveable vehicle or apparatus, including but not limited to motorized vehicles, trailers, and hand propelled carts.*

All Mobile Food Units	Yes	No	N/A
Is there at least one carbon monoxide detection device in the unit? (Except hand propelled carts.)			
Is there at least one 5 pound ABC multipurpose portable fire extinguisher? (Except hand propelled carts.) (Must be installed, serviced, tested, and maintained as required by the fire code.)			
Is there a no smoking sign posted inside the unit? (Except hand propelled carts.)			
Does electrical equipment and wiring appear to be installed in a professional manner?			
Is the unit separated from buildings, vehicles, or combustible materials by a distance of at least 10 feet? (Distance does not include awnings.) (Units that use a generator or other fuel sources only.)			
Is the unit separated from other mobile food units by a distance of at least 10 feet? (Separation distance does not include awnings.) (Units that use a generator or other fuel sources only.)			

Mobile Food Units with Commercial Cooking Equipment	Yes	No	N/A
Is at least one Class K fire extinguisher provided for cooking equipment that involves solid fuels, vegetable oils, or animal oils and fats? (Must be installed, serviced, tested, and maintained as required by the fire code.)			
Are there at least two means of egress in the unit, and are they located remotely from each other? (Serving window can be used as a means of egress if at least 5.7 square feet.)			

Mobile Food Units with LP Gas	Yes	No	N/A
Does the unit have an exterior emergency LP Gas shut off quarter turn control valve that is easily distinguishable and accessible?			
Is the exterior shut off valve marked with a sign stating "Emergency Gas Shut Off Valve"?			
Are only ASME or DOT mobile LP Gas containers being used?			
Is the maximum aggregate capacity of all LP Gas containers for a mobile food unit 200 gallons of aggregate water capacity or less?			
Is a no smoking sign posted outside the mobile food units near the area where the LP Gas is stored or kept?			
Are the LP Gas containers secured to the mobile food unit or otherwise secured in a safe manner. (Must be secured with non-combustible materials.)			
Are the LP Gas supply piping, connections, and cooking appliances free from defect and secured in a safe manner?			

You are hereby notified that a mobile food unit inspection has been conducted. This inspection shows that the following hazard(s) do exist and must be corrected. A re-inspection will be made to check for compliance. The City of Solon assumes no liability or responsibility for failure to report violations that may exist, and makes no guarantee whatsoever that future violation(s) cannot or will not occur.

Date of Inspection: _____ Time of Inspection: _____

Inspector: _____

Remarks:

Inspector's Signature: _____

 Date of Re-Inspection: _____ Time of Re-Inspection: _____

Inspector: _____

Remarks: _____

Inspector's Signature: _____