



WESTPORT WESTON HEALTH DISTRICT

180 Bayberry Lane, Westport, CT 06880-2855
Telephone: (203) 227-9571

**Application:
Temporary Refrigerated Truck Use**

Name of Establishment: _____

Address of Establishment: _____

Mailing Address: _____

Telephone: (____) _____

Name of Applicant/Contact Person: _____

FEE: \$ 55.00
Fee must be submitted with application

Requirements for Use of Refrigerated Truck for Temporary Adjunct Cold Holding

If all requirements are satisfied, approval will be made to use a refrigerated truck for a period of time not to exceed fourteen (14) days. If proposed use of refrigerated truck exceeds seven (7) days, Zoning must provide approval prior to receiving Health District approval. This application must be completed and submitted to the Westport Weston Health District at least fourteen (14) days prior to proposed truck use.

The applicant must be able to demonstrate the following:

- Foolproof method for ensuring no interruption to the power connection
- Truck is inaccessible to vermin
- Traffic to and from truck will not result in excess dirt/soil in the food service establishment
- Proper continuous monitoring of temperature by use of a recording thermometer with script charts

Final approval will not be made until a satisfactory scheduled inspection of the truck is made by a Sanitarian. A Sanitarian will visit the establishment at least once during refrigerated truck use to review temperature charts and ensure that the food is adequately protected.

_____ *For Office Use Only* _____

Data Application Approved:	Date Permit Issued:	Date Mailed/Delivered
By:	By:	By:

Details of Refrigerated Truck Use
Must be completed by Applicant

Dates of Truck Use* _____
(If proposed refrigerated truck use exceeds 7 days, contact Zoning for prior approval)

Reason for Truck Use: _____
(holiday, emergency, etc.)

Source of Truck: _____

Power Source: (describe how refrigeration will be powered and how security of power connection will be ensured) _____

How will the tracking of excess dirt/soil into the food establishment be prevented: _____

How will the air temperature of the refrigerated truck be continuously monitored? _____

Refrigerated Truck Inspection
To be completed by Sanitarian

Date of Pre-Operational Inspection: _____

Power Connection Secure	Yes___	No___
Truck Inaccessible to Vermin	Yes___	No___
Trafficking of Soil to Establishment Prevented	Yes___	No___
Continuous Monitoring of Temperatures with script charts provided	Yes___	No___

Approval Granted to Operate Refrigerated Truck _____
Sanitarian Signature

Date of Follow-up Inspection: _____

Follow-up review of script charts indicate proper food temperature being maintained:
Yes___ No___

Sanitarian Signature

Notes: _____
