BOLL WEEVIL FALL FESTIVAL MOBILE VENDOR/FOOD TRUCK – SAMPLE INSPECTION FORM

*This form is an example of items that may be required by local health and safety officials created by the Enterprise Chamber of Commerce for event purposes. All participating vendors are responsible for contacting the appropriate authorities to verify the exact requirements of each agency.

Inspection Date:					
Company Name:		Own	er Name:		
Owner Address:			Phone Number:		
Vehicle Type:		1 11011	ic ivallibei	•	
verneie Type.					
INSPECTION REQUIREMENTS					
	PASS	FAIL	N/A	COMMEN.	rs
Fire Extinguishers:	l	I			
Installed					
Yearly Inspection					
Class K					
Hood/Suppression System:			1		
Installed					
Inspected					
Hood Cleaned					
LP Gas:					
Access to Shut Off					
Approved Gas Line Installation					
Connectors or T's are Under Unit					
NO CSST Piping Installed in Unit					
All Tanks Secured					
Tanks less than 12 years					
old/recertified					
Electrical					
No Exposed Wiring					
All Outlets Covered					
Extension Cords of Proper Size &					
Good Condition					
General	T			_	
Wheel Chocks on Vehicle					
Exits Free from Obstructions			1		

Inspection Officer: ______

For Additional Questions About Exact Requirements Please Contact One of the Following Agencies:

- City of Enterprise Business License (334) 348-2674
- Coffee County Health Department (334) 347-9574
- Enterprise Fire Department (334) 348-2641
- Enterprise Chamber of Commerce (334) 347-0581