



MCHD ENVIRONMENTAL

453 Van Voorhis Rd Morgantown, WV 26505 Phone: 304-598-5131 Fax: 304-598-5122



MOBILE FOOD UNIT/CART PLAN REVIEW PROCESS

Please follow the steps outlined below and contact our office at (304) 598-5131 if you have questions.

1. Obtain the plan review and application forms from our office or our website.

The plan review form must be completed in accordance with the 2013 FDA Food Code as adopted by the West Virginia legislature. HTML and PDF versions of the Food Code are available via the Internet at:

<https://www.fda.gov/food/guidanceregulation/retailfoodprotection/foodcode/ucm374275.htm>

2. Please allow 30 days for the review process of existing or remodeled facilities and 45 days for new construction. Every attempt will be made to complete the plan review in a timely manner on a first come, first serve basis. Submit the plan review and application forms, with payment of the following fees to the Monongalia County Health Department:

- a. Plan Review: \$150.00 for the initial plan review - additional time will be charged at a fee of \$90.00 per hour
- b. Permit fee for a Mobile Food Unit: \$100.
- c. \$125.00 for the mandatory Food Service Managers' Course. This course is required of one individual for every permitted facility. An individual may only represent one facility.

3. After you receive your approval letter, you must contact your Health Department representative for an inspection prior to operating.

Our staff hopes that this checklist will guide you through the food service plan review process. If you have questions, please contact the Environmental Health Business Office at (304) 598-5131.

General Requirements for Mobile Food Units

DEFINITIONS OF TERMS

- **Mobile Food Unit (MFU):** An enclosed trailer, van, pushcart, recreation vehicle or similar enclosed mobile facility that is transported from site to site for the purpose of dispensing food to the public.
- **Mobile food service establishment:** Any mobile unit in which food or drink is prepared for sale or for service to the public with or without charge.
- **Potentially hazardous food:** A food that consists in whole or in part of milk or milk products, eggs meat, poultry, fish, shellfish, edible crustacean, whipped butter, or whipped margarine, heat-treated plant foods, raw seed sprouts, cut melons, garlic in oil mixtures that are not modified (acidified) or other ingredients, including synthetic ingredients, in a form capable of supporting rapid and progressive growth of infectious or toxigenic microorganisms.

GUIDELINES--DESIGN AND CONSTRUCTION

- A MFU Plan Review packet must be submitted along with the appropriate fees to the Monongalia County Health Department for approval at least 30 days prior to the beginning of any construction of a new MFU, or major renovation of an existing permitted MFU.
- Submit an accurate drawing of the interior of the proposed MFU which must include the location and description of all food service equipment, cut-sheets for all food service equipment, the finish materials used on the walls, floor, and ceiling, and the proposed menu. *All food service equipment must be NSF approved or equivalent.*
- If your proposed MFU will handle and/or sell open food products, you must have a **permitted commissary** to utilize. A commissary will be used for obtaining potable water, disposal of gray water, cleaning and sanitizing of the unit, and storage of additional equipment, bulk food, dry goods, utensils, and paper products. The commissary may be permitted by any jurisdiction within West Virginia, or the neighboring states; however, the commissary must be within reasonable proximity to the site of the proposed MFU operation. A private residence is **not approved** as a commissary.
- **Safe water and adequate wastewater facilities** shall be provided in all mobile units. The system shall be of sufficient capacity to furnish enough hot and cold water for food preparation, utensil cleaning and hand washing. Liquid waste generated by the operation of the mobile food unit shall be stored in a permanently installed retention tank that is at least 15 per cent larger than the potable water supply tank.
- A **hand washing sink** with hot and cold running water, hand soap and paper towels must be provided in each MFU.
- Mobile units shall be equipped with a **water heater** that will provide sufficient amounts of hot water to hand lavatories and utensil washing facilities.
- **Utensil washing** facilities consisting of a plumbed three compartment sink with drainboard area is required for all mobile units. The preparation of non-potentially hazardous food meeting the definition of limited-menu foods will be exempted from this requirement as long as a plumbed in hand sink equipped with hot and cold running water is provided and dispensing utensils are limited to one or two utensils such as a tongs, fork, spoon or scoop.
- **Mechanical ventilation** consisting of a metal hood with removable metal grease collecting filters shall be provided over all cooking equipment if the unit contains a fryer, grill, charbroiler, stove, etc producing smoke, steam or grease vapors.

- **Mobile units shall be completely enclosed.** Protective screens or movable windows shall be provided for customer service windows and openings. Floor, walls, and ceiling in the MFU must be covered with materials that are nonabsorbent, smooth and easily cleanable.
- **The lighting** in the MFU shall be shielded to protect against broken glass contaminating the food or food contact surfaces.
- **Food preparation and storage equipment** must be in good repair and easily cleanable.

GUIDELINES-- HANDLING AND OPERATIONS

- Menu items for a MFU shall be reviewed on an individual basis depending upon the facilities provided on-board the MFU.
- All foods must be prepared in the MFU or at your permitted commissary and be secured from an approved source. This includes all meat, milk, eggs, ice or foods dispensed from the mobile unit. **No foods may be prepared in a private home and dispensed from the mobile unit.**
- Potentially hazardous foods must be stored cold below 41° F or held hot above 135° F. All foods shall be initially cooked to the following temperatures:
 - Hamburger(ground meats) 155° F
 - Fish and Seafood 145° F
 - Pork and pork products 155° F
 - Poultry 165° F
- Meats and other potentially hazardous foods must be thawed under refrigeration or under potable running water of 70° F or below, or as a part of the cooking process.
- Adequate refrigeration must be provided to maintain product temperatures. A thermometer must be provided in each refrigeration unit.
- A metal-stem thermometer must be available in each mobile food service establishment. This thermometer must be used to check the internal temperature of potentially hazardous foods. The thermometer must have a temperature range from 0° to 220° Fahrenheit.
- All mobile food service employees shall wear nets, caps, hats or other effective hair covering to restrain their hair. Employees must practice good personal hygiene. All employees must wash hands thoroughly before beginning work and frequently throughout their work shift.
- All food preparation areas and food contact surfaces of equipment shall be cleaned and sanitized on a regular basis using a sanitizing solution of 1 tsp. of household bleach to 1 gal. of water. Wet wiping cloths must be stored in a sanitizing solution when not in use.
- Only single service articles shall be provided to the consumer. Single service items must be dispensed from the original container or from an approved dispensing device. Single service items must be protected from contamination during storage.
- All utensils used for the dispensing of potentially hazardous food must be stored cleaned and dried, in the product or in a running water dipper-well after each use. Utensils stored in the product shall be cleaned and sanitized every two (2) hours, or whenever there is an interruption of operation or slack time.

MONONGALIA COUNTY HEALTH DEPARTMENT

Mobile Food Unit Plan Review Application

Date: _____ ☐ NEW ☐ CONVERSION ☐ CHANGE OF OWNERSHIP

Name of Unit/Cart: _____

Name of Owner: _____

Mailing Address: _____

Telephone: _____

Commissary Name: _____

Physical Address: _____

Telephone: _____

Applicant's Name: _____

Mailing Address: _____

Telephone: _____

Title (owner, manager, architect, etc.): _____

Hours of Operation: Mon _____ Tues _____ Wed _____ Thurs _____

Fri _____ Sat _____ Sun _____

Maximum Meals to be Served: Breakfast _____ Lunch _____ Dinner _____
(approximate number)

1. Provide a diagram of the unit/cart drawn to a minimum scale of 1/4 inch = 1 foot. Show the location of all food equipment clearly labeled on the diagram with its common name - cooler, propane grill/burner, hand sink, two or three bowl sink, etc. All heating and cooling including refrigeration equipment must be commercial - no home type equipment is permitted. Coolers are not required to be commercial as they may only be used for beverages and items that are not potentially hazardous food (PHF). Provide food equipment make, model numbers and certification or classification for sanitation by an ANSI accredited certification program.

2. A three-compartment sink may be required based upon the menu.

3. Include and provide locations of the cart/unit in relation to alleys, streets, parking areas and location of outside dumpsters or trash receptacles.

PLEASE CHECK /ANSWER THE FOLLOWING QUESTIONS - USE NA IF NOT APPLICABLE

FOOD PREPARATION REVIEW

All food employees must be trained in food safety by obtaining a [Permanent](#) or [Temporary](#) Food Worker's permit from our health department. Please provide a list and dates of completion or copies of their cards. As a separately permitted entity, someone must attend OR test out of our Food Manager's Training.

1. Provide the menu including condiments, beverages and ice. State whether items are commercially prepared, prepackaged or prepared from raw ingredients. Indicate items prepared on site as OS and those prepared in the commissary as C.

Produce must be washed in the commissary or purchased in RTE form UNLESS a food prep sink is provided or use of the two/three bowl sink is approved.

2. Explain how and where food is prepared if use of a separate prep sink is typically required.

3. Will disposable gloves, utensils and/or food grade paper be used to prevent handling of RTE foods? YES NO NA

4. Please briefly describe your policy to exclude or restrict food workers who are sick or have infected cuts and lesions.

Ingredients for cold ready-to-eat (RTE) foods such as tuna, mayonnaise and eggs for salads and sandwiches must be pre-chilled before being mixed and/or assembled.

5. Describe the procedure used for minimizing the length of time PHF will be kept in the temperature danger zone (41°F - 140°F) during preparation.

FOOD SUPPLIES

State all food sources - distributor, wholesaler, retailer, facility, Farmer's Market (provide location).

COLD STORAGE

Adequate and approved units are required to store refrigerated foods at 41°F or less AND to keep foods frozen as applicable.

1. Does each refrigerator/freezer have a thermometer? YES NO NA

Number of refrigeration units: _____ Number of freezer units: _____

2. Will raw meats, poultry and seafood be stored in the same refrigerators and/or freezers with cooked/ready-to-eat foods? YES NO NA If YES, how will cross-contamination be prevented?

THAWING FROM POTENTIALLY HAZARDOUS FOOD

Please indicate by checking the appropriate boxes how frozen potentially hazardous foods (PHF's) in each category will be thawed. More than one method may apply. For other, indicate where thawing will take place. **Thick** more than an inch **Thin** one inch or less

Thawing Method	* THICK FROZEN FOODS	* THIN FROZEN FOODS
Refrigeration		
Running Water Less than 70°F(21°C)		
Microwave (as part of cooking process)		
Cooked from Frozen state		
Other (describe)		

COOKING

1. Is a temperature chart provided for determining the final cooking temperature of PHF?
YES NO NA If NO, how is the final temperature determined?

2. Will thermometers be used to measure final cooking/reheating temperatures of PHF?
YES NO NA If NO, how will the final temperature be measured?

3. List type of thermometer(s) and foods they will be used for: _____

HOT/COLD HOLDING

1. How will the food temperatures be maintained during transportation between the commissary and unit/cart location?

2. How will hot PHF maintain 135°F or above during holding for service?

3. How will cold PHF maintain 41°F or below during holding for service?

REHEATING

1. List any PHF that is reheated on site. _____

2. How will PHF be rapidly reheated within 2 hours to 165°F for 15 seconds?

INSECT AND RODENT CONTROL

- 1 Will all outside doors be self-closing and rodent proof? YES NO NA
2. Do all openings have a minimum #16 mesh screening? YES NO NA
If NO, will air curtains be used? YES NO NA If YES, where?

3. Will electrocution devices be used? YES NO NA If YES, state type and location. _____

GARBAGE AND REFUSE

- | | | | |
|---|-----|----|----|
| 1. Is there any area to store returnable damaged goods? | YES | NO | NA |
| 2. Do all waste containers have lids? | YES | NO | NA |
| 3. Is location clear of unnecessary brush, litter, boxes and other harborage? | | | |

WATER SUPPLY

YES NO NA

1. Is water supply Public or Private?

If private, has source been approved? YES NO Pending

If private, please attach copy of written approval and/or permit.

2. State capacity of water storage tank. _____

3. How is water heated or stored for handwashing and cleaning/sanitizing? State size and recovery rate of hot water tank if provided. _____

4. Is ice made at the commissary, on premises, or purchased commercially?

Describe provision for ice scoop storage if used: _____

SEWAGE DISPOSAL

1. State capacity of wastewater storage tank: _____

2. Where is the wastewater tank emptied? _____

HANDWASHING/TOILET FACILITIES

1. Is a handwashing sink provided with a mixing valve or combination faucet producing hot and cold water under pressure? YES NO

2. Do self-closing metering faucets provide a flow of water for at least 15 seconds without the need to reactivate the faucet? YES NO

3. Are cleanser and disposable towels available at all handwashing sinks? YES NO

4. Are handwashing signs posted at all hand washing areas including public areas?

YES NO NA

WAREWASHING FACILITIES

1. How will cooking equipment, cutting boards, counter tops and other food contact surfaces be cleaned and sanitized? _____

2. Does the unit/cart have sinks for dishwashing? YES NO If NO, skip to #5.

If YES, check one: Two compartment sink Three compartment sink

Describe the dishwashing process of your two or three bowl sink. _____

3. Does the largest pot/pan fit into each compartment of the dishwashing sink? YES NO

If NO, what is the procedure for manual cleaning and sanitizing? _____

4. Are drain boards on both ends of the dishwashing sink? YES NO If NO, where are dirty items placed and where are items air dried? _____

WAREWASHING FACILITIES

5. Indicate type(s) of sanitizer used along with water temperature and concentration.

Sanitizer test kits or papers must be provided.

Chlorine	Water Temperature _____	Concentration _____
Iodine	Water Temperature _____	Concentration _____
Quaternary Ammonium	Water Temperature _____	Concentration _____
Hot water	Water Temperature _____	Concentration _____
Other	Water Temperature _____	Concentration _____

DRY GOODS and FOOD STORAGE

Appropriate storage space must be provided based upon menu and total number of meals.

1. Indicate storage locations for food/beverages, utensils, cookware, paper products, etc.

2. How will dry goods be stored off the floor? _____

3. All food containers must be of safe and approved material. Indicate each type of food container, type of material and the manufacturer. _____

SMALL EQUIPMENT REQUIREMENTS

Please specify the number and types of each of the following:

Slicers _____

Cutting boards _____

Can openers _____

Mixers _____

Floor mats _____

Other _____

FINISH SCHEDULE

Indicate which materials (quarry tile, stainless steel, 4" plastic coved molding, etc.) will be used in the following areas.

Walls _____

Floors _____

Coving _____

Ceiling _____

PLUMBING CONNECTIONS

Please check the appropriate column for the type of plumbing connection provided OR mark NA as appropriate.

TRAP: A fitting or device which provides a liquid seal to prevent the emission of sewer gases without affecting the flow of sewage/waste water through it. An integral trap is one built directly into the fixture, e.g..a toilet fixture. A "P" trap provides a liquid seal in the shape of the letter "P." Full "S" traps are prohibited.

	AIR GAP	AIR BREAK	* INTEGRAL TRAP	* "P" TRAP	* VACUUM BREAKER	CONDENSATE PUMP
18. Toilets						
19. Urinals						
20. Dishwasher						
21. Garbage grinder						
22. Ice machines						
23. Ice storage bin						
24. Sinks a. Mop b. Janitor c. Handwash d. 3 Compartment e. 2 Compartment f. 1 Compartment g. Water Station						
25. Steam tables						
26. Dipper wells						
27. Refrigeration condensate/ drain lines						
28. Hose connection						
29. Potato peeler						
30. Beverage Dispenser w/ Carbonator						
31. Other _____						

GENERAL

Insecticides and rodenticides must be applied by a professional certified pest applicator.

1. What methods are used for the control and extinction of insects and rodents?

All containers of toxics including sanitizing spray bottles must be clearly labeled. All toxics including cleaners, sanitizers, personal medications and first aid kits must be stored away from food, equipment, utensils, linens and paper products.

2. Where are toxic items stored?

3. Location of clean linen (wiping/dish cloths, hot pads/mitts) storage:

4. Location of dirty linen storage:

5. Where and how are linens cleaned?

6. Describe storage location for employees' personal belongings.

7. Is an exhaust hood or ventilation system installed?

YES

NO

If YES, how is it cleaned?

STATEMENT: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from this Health Regulatory Office may nullify final approval.

Signature(s)

owner(s) or responsible representative(s)

Date:

Approval of these plans and specifications by this Regulatory Authority does not indicate compliance with any other code, law or regulation that may be required--federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A pre-opening inspection of the establishment with equipment in place and operational will be necessary to determine if it complies with the local and state laws governing food service establishments.



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APPLICATION FOR A PERMIT TO OPERATE A FOOD ESTABLISHMENT

FOOD ESTABLISHMENT NAME: _____ Telephone _____

Mailing Address _____

Location _____ Hours of Operation _____

E. Mail Address _____ Fax _____

APPLICANT NAME: _____ Age >18? Yes No Telephone _____

Mailing Address _____

PERMIT TO BE ISSUED TO: Applicant Other Legally Responsible Entity: _____

OWNERSHIP: Individual Association Corporation Partnership Other Legal Entity

Names, titles & addresses of persons comprising legal ownership (continue on reverse if necessary):

PERSON DIRECTLY RESPONSIBLE FOR ESTABLISHMENT (MANAGER, PERSON-IN-CHARGE): (24 HOUR CONTACT NUMBER)

Name _____ Title _____ Telephone _____

REPRESENTATIVE THAT HAS SUCCESSFULLY COMPLETED MCHD MANAGER'S TRAINING CLASS:

Name _____ Title _____

IMMEDIATE SUPERVISOR OF PERSON DIRECTLY RESPONSIBLE (ZONE, DISTRICT, REGIONAL SUPERVISOR):

Name _____ Title _____ Telephone _____

Address _____

ESTABLISHMENT TYPE:

Restaurant (includes fast food, caterer, commissary, concession stand, bed & breakfast inn, organized camp, feeding site)

Retail food store (grocery store, convenience store, meat market) No. of Checkout Stations: _____

Retail food store specialty dept. (deli, bakery, or seafood)

Institution (hospital, jail, school, child care center, adult care center, nursing home, personal care home)

Bar or Tavern (primary business is the serving of alcohol, not food)

Vending Machine (serving potentially hazardous foods) Food Bank

Establishment is Mobile or Stationary And Permanent or Temporary (<14 days)

Meals Provided: Breakfast Lunch Dinner Sit Down Take Out Delivery Mail Order

Seating Capacity _____ **Average number of meals served per day** _____

TYPE OF OPERATION: (PHF = potentially hazardous food; foods that require refrigeration.)

No PHF Prepackaged non-PHF only or limited prep of non-PHF.

Limited 1 or 2 main menu items. Cooking, cooling, reheating limited to 1 or 2 PHF. Limited hot and cold holding of PHF. Limited advance prep for next day service. Raw ingredients require minimal assembly. Includes retail food stores (excluding specialty depts.)

Full Preparing PHF using 2 or more steps which may include cooking, cooling, reheating, hot and cold holding, freezing, or thawing. Extensive handling of raw ingredients. Advance prep for next day service. Includes retail food store specialty depts.

Yes No Does operation serve a highly susceptible population? (preschool children or immunocompromised or older adults such as day care centers; hospitals; nursing homes; or personal care homes.)

The establishment menu must be attached or listed on the reverse side

I hereby certify that the above information is accurate. Further, I agree to comply with WV Legislative Rule 64 CSR 17, all applicable Monongalia County Board of Health rules, and to allow the regulatory authority access to the establishment and to records as specified therein.

Date _____ **Signature of Applicant** _____



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2019 MCHD FOOD SAFETY TRAINING SCHEDULE

EVERYONE working or volunteering in a Food Establishment in Monongalia County must obtain a MCHD Food Service Worker card. Classes are taught at the Health Department.



Online Food Worker Training available at:

online.mchdehs.org



FOOD WORKER'S CARD CLASSES

\$10 per year issued – cash, credit, debit or business check. **Photo Id Required!**

DATE	CLASSES AT
JANUARY 8	10 am & 2 pm
JANUARY 22	3:30 pm only
FEBRUARY 12	10 am, 2 pm & 6 pm
MARCH 12	10 am & 2 pm
MARCH 26	3:30 pm only
APRIL 9	10 am, 2 pm & 6 pm
MAY 14	10 am & 2 pm
MAY 28	3:30 pm only
JUNE 11	10 am, 2 pm & 6 pm
JULY 9	10 am & 2 pm
JULY 23	3:30 pm only
AUGUST 13	10 am, 2 pm & 6 pm
SEPTEMBER 10	10am & 2 pm
SEPTEMBER 24	3:30 pm only
OCTOBER 8	10 am, 2 pm & 6 pm
NOVEMBER 12	10 am & 2 pm
NOVEMBER 26	3:30 pm only
DECEMBER 10	10 am, 2 pm & 6 pm

Each class is limited to 100 students.

Registration begins 30 min prior to each class.

TEMPORARY FOOD WORKER'S CARDS

(Environmental Health Office)

Every Weekday (except for holidays)

9:00 - 11:00 am & 1:00 - 4:00 pm

\$1 per week issued - **cash only**

PERSON IN CHARGE (PIC) CLASSES

DATE	CLASSES AT
JANUARY 29 (Tue)	8 am to 3 pm Lunch 11:30 am - 12:30 pm \$35 per person REGISTRATION 8:30 - 8:50 AM
MARCH 18 (Mon)	
MAY 21 (Tue)	
JULY 22 (Mon)	
SEPTEMBER 17 (Tue)	REGISTRATION 8:30 - 8:50 AM
NOVEMBER 18 (Mon)	

MCHD trained PIC or Manager must be present at all times as enacted 5/26/16 by MCHD Board of Health.

FOOD MANAGER'S CLASSES

DATE	CLASSES AT
MARCH 5 - 6	8 am – 5 pm EACH DAY \$125 per person REGISTRATION 8:00 - 8:10 AM
APRIL 29 - APRIL 30	
JUNE 17 - 18	
AUGUST 19 - 20	
OCTOBER 15 - 16	REGISTRATION 8:00 - 8:10 AM
DECEMBER 2 - 3	

All sessions are Mondays and Tuesdays.

FOOD MANAGER'S TESTING

(Terri Berton's Office)

DATE	TESTING AT
FEBRUARY 13	8:15 am - 12 pm \$50 per person For those with knowledge of the current Food Code as adopted by WV.
APRIL 16	
MAY 15	
JULY 17	
SEPTEMBER 18	
NOVEMBER 13	

Cash, credit, debit or business check accepted. **Photo ID Required!**

For schedule changes or cancellations:

facebook.com/wvmchd or twitter.com/wvmchd.

Call Terri Berton at 304-598-5138 or email terri.a.berton@wv.gov to register for Manager Training. Offsite and special training available to groups of 25 or more.



Monongalia County Health Department

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FOOD ESTABLISHMENT MANAGER'S TRAINING

This two-day course is intended to lessen the risk of foodborne disease while providing valuable information regarding the 2013 FDA Food Code as enacted by the WV Legislature. This code requires a Certified Food Protection Manager (CFPM). This course also covers material for the CFPM exam. A valid email is required for the link to National Registry's exam information. Facilities with multiple permits must have one CFPM for each permitted location.

NAME(S) _____

FACILITY _____

FACILITY LOCATION _____

EMAIL _____

PHONE _____

SIGNATURE/DATE _____

CIRCLE DATE April 29 - 30 OR June 17 - 18 OR August 19 - 20

8 am - 5 pm each day Someone must attend within this time frame or fee(s) will be forfeited.

CIRCLE EXAM LANGUAGE English Spanish Korean Modern Chinese Traditional Chinese

Class is limited to the first 35 paying participants. Registration is 8:00 - 8:10 am.

Course cost per person of \$125.00 is required 2 weeks prior for placement in the class.

Anyone rescheduling will be assessed a \$5 test reorder fee.

Once payment is received, the training manual may be obtained at the county health department. As a reminder, we will notify the above participant one week prior to the course date. Facility must notify us in advance of any participant changes. Please bring a writing instrument to class along with a photo ID. A three-year food worker's card will be issued to those completing the entire course. **Participants must pass the CFPM exam on the second day of the course to receive a certificate that must be posted in the facility. Since materials are only available in English, translators are encouraged to attend the training.**

Individuals with extensive working knowledge of the current Food Code or in need of recertification of an existing CFPM program may complete the exam. The two-hour exam will occur **10 AM - 12 PM with registration 9:20 - 9:30 AM**. Please choose from the following list of test dates:

April 16 OR May 15 OR July 17 OR Sept 18 OR Nov 13

Exam cost per person is \$50.00 pass or fail and must be received 2 weeks prior. Anyone rescheduling will be assessed a \$5 test reorder fee. A food worker's card is not issued to those just completing the exam. You may attend a 1-hour exam overview with sample exam questions from 8:30 -9:30 am for an additional \$10 AND obtain a 1-year food worker card.



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Monongalia County Health Department

PERSON IN CHARGE (PIC) TRAINING

The 2013 FDA Food Code (FC) as enacted by the WV Legislature requires a knowledgeable Person in Charge (PIC) to be present in every permitted facility. The Monongalia County Board of Health requires all PICs to complete our training course or to be a CFPM. This course offers valuable information regarding the FC as well as responsibilities and duties of the PIC.

NAME(S)

PHONE OR EMAIL

FACILITY

FACILITY LOCATION

SIGNATURE/DATE

PLEASE CIRCLE DATE May 21 OR July 22 OR Sept 17 OR Nov 18
9 am - 3 pm

Registration 8:30 - 8:50 AM. Participants will have a 1-hour lunch break at 11:30 am.

Course cost per person of \$35.00 is required 1 week prior for placement in the class.
Someone must attend within this time frame or fee(s) will be forfeited.

As a reminder, we will notify the above participant one week prior to the course date. Facility must notify us in advance of any participant changes. Please bring a writing instrument to class along with a photo ID as all other materials are supplied. A one-year food worker's card will be issued OR one year will be added to an existing FW card to those completing the entire course. **Participants must complete a worksheet at the end of the course to receive a certificate that must be posted in the facility. Since materials are only available in English, translators are encouraged to attend.**

Online training is also available (in English) through our website,
monchd.org/food-safety-training.html