Mobile Food Vendor Vehicle Self-Inspections 2020

Effective March 20, 2020 through December 31, 2020 – food truck and mobile vendor inspections will only be completed utilizing the Self-Inspection form attached to this notice. To complete the city permit process, a copy of the completed attached form will need to be turned in to the Fire Department AND the City Clerk’s office.

This form can be returned to the Fire Department by mail, drop off or email:

Mail: Des Moines Fire Dept  
Attn FPB  
2715 Dean Avenue  
Des Moines, IA 50317

Drop-off: Drop the form in the basket at the front door/table

Email: Firedept@dmgov.org

** The City Clerk also needs a copy of this form included with your other paperwork **

Name of Owner: ___________________________________________________________

Name on Truck/Business: ___________________________________________________

Phone number: ___________________________________________________________

I certify that I have inspected my vehicle on _______________ and it is in compliance.

Signed on Date: _____________________

Print Name: _________________________

Signature: _________________________

Thank you for your understanding during these unprecedented times. Be safe.
Des Moines Fire Department  
515-283-4240

This form must be turned into the Des Moines Fire Department and City Clerk’s Office prior to using the Mobile Food Truck.
FPB POLICY 2016-1: Mobile Food Vendors
Created: January 22, 2016 Effective Date: June 1, 2017 Immediately

From the Office of the Fire Prevention Bureau – Phone (515) 283-4240
This policy is promulgated in accordance with Section 104.1 of the 2015 International Fire Code (IFC) and is an
official interpretation of Chapter 78, Article V. Mobile Food Vendors of the City of Des Moines Municipal Code.

The following shall apply to any mobile vendors who sell food other than prepackaged items that do not require hot or cold handling procedures within the City of Des Moines.

Requirements:
Exhaust Hood: A Type I hood (with fire suppression system) shall be installed at or above all commercial cooking appliances and domestic cooking appliances used for commercial purposes that produce grease vapors. Commercial kitchen exhaust hoods shall comply with the requirements of the International Mechanical Code.

Maintenance. Hoods shall be inspected, tested, and maintained in accordance with IFC 2015 Section 609.2.

Inspections and tests. Kitchen hood extinguishing systems shall be inspected and tested at least every six months by a State of Iowa licensed fire protection contractor.

Fire extinguishers. In accordance with IFC, edition 2015, section 904.11.5, an approved 2A:20B:C rated dry chemical fire extinguisher shall be provided on or within the mobile vendor vehicle or trailer. An approved Class K rated fire extinguisher shall be provided within 30 feet (9144 mm) of cooking operations involving solid fuels or vegetable or animal oils and fats.


Maximum number and quantity. A maximum of two LP-gas containers with a total aggregate water capacity of 50 gallons (190 L) is permitted at one mobile vendor.

LP-gas cylinder hoses. Hoses shall be designed for a working pressure of 350 psig (2413 kPa) with a safety factor of 5 to 1 and shall be continuously marked with LP-GAS, PROPANE, 350 PSI WORKING PRESSURE, and the manufacturer’s name or trademark. Hose assemblies, after the application of couplings, shall have a design capability of 700 psig (4826 kPa). Hose assemblies shall be leak tested at the time of installation at not less the operating pressure of the system in which they are installed.

Location. Mobile food vehicles shall not be located within 20 feet (6096 mm) of buildings, tents, canopies or membrane structures.

Exception: When mobile food vehicles are positioned on public streets, the distance from buildings may be reduced to 5 feet.

Inspection. All mobile vendors who sell food other than prepackaged items that do not require hot or cold handling procedures shall be required to have a fire inspection as part of the licensing process. Only after a mobile vendor has applied through the City Clerk's office and paid the appropriate fees shall the vendor contact the DMFD Fire Prevention Bureau at 515-283-4240 or firedept@dmgov.org to schedule an inspection.

Any comments or questions regarding the above information may be submitted to:

Office of the Fire Marshal
City of Des Moines Fire Department
Fire Prevention Bureau
2715 Dean Avenue
Des Moines, Iowa 50317 Office:
(515) 283-4240
Fax: (515) 283-4907
Email: firedept@dmgov.org
MOBILE FOOD VENDOR SELF-INSPECTION FORM

Name of Truck/Business: ____________________________________________________________

Address: _______________________________________________________________________

Contact Person: ___________________________ Phone Number: _________________________

Email: ____________________________________________

Truck; Make_____________ Model_______________ License Plate_______________

NOTES

___ Exhaust Hood   Type I (Reference; 2018 IFC section 607.2)
   __ Filters are present and clean
   __ Fire extinguishing system is present
   __ System has a current DMFD tag
   __ Records

___ Fire Extinguishers (Reference; 2018 IFC section 906.4)
   __ 2A:20BC (minimum size is present)
   __ Class K (is present and accessible)

___ LP System   (Reference; NFPA 58, 2014 edition, section 6.24)
   __ Tanks (Max. 2 and total of 50 gallons)
      __ Tank is mounted securely
      __ LP Shutoff valve readily accessible
      __ If tank is Inside, must be a vapor tight cabinet
      __ Regulators (protected from damage)
      __ Hoses rated for 350psi marked LP gas (propane)
      __ Fixed piping:
          __ Securely Fastened
          __ Rubber Grommets at pass through points

___ Egress (two ways out of the food truck)

___ General House Keeping / Storage
   (truck is clean and free from accumulation of trash and combustibles)

Based on the inspection completed above, the mobile food truck referenced in the information above
DOES / DOES NOT (circle one) demonstrate substantial compliance with the adopted codes, standards and policies of
the City of Des Moines Fire Department as witnessed on the date below.

Vendor__________________________________Signature_________________________________Date____________