



FOOD TRUCK / CONCESSION TRAILERS / TENTS

VENDOR NAME: _____ DATE: _____

CONTACT NAME: _____ PHONE#: (____) _____

ITEM	SAT	UNSAT	N/A	ITEM	SAT	UNSAT	N/A
GENERAL SAFETY				FIRE SUPPRESSION SYSTEM			
1) Current City Business License				1) Portable ABC Fire Extinguisher			
2) Current Health Department Permit				A. Minimum 2A:10BC (Non Propane Units)			
3) No public seating inside unit				B. Minimum 4A:40BC (Propane Units)			
4) Minimum 10 ft. clearance around unit				C. Travel distance <30 feet			
5) Adequate fire department access				D. Current certification tag			
POWER SOURCE (GENERATORS) & FUEL SUPPLY				E. Visible and accessible			
1) Fuel tanks filled to capacity				2) Portable Class K Fire Extinguisher			
REFUELING IS ONLY ALLOWED DURING NON-OPERATING HOURS				A. Minimum 2.5 gallon Class K			
2) Portable Generator Exhaust System				B. Travel distance <30 feet			
A. Min 10 ft from opening and intakes				C. Current certification tag			
B. Min 10 ft from means of egress				D. Visible and accessible			
C. Directed away from buildings				3) Hood System			
D. Directed away from other vendors				TYPE 1 HOOD SYSTEM REQUIRED FOR FRYING OR GRILLING OPERATIONS			
3) All electrical complies with NFPA 70				A. Current certification tag (6 Months)			
4) Protective barrier around generator				B. Manual pull station			
LP-GAS SYSTEM				C. Filters clean / in place			
1) Main shut off valve accessible				D. UL-300 compliant			
2) Portable containers upright and secure				E. Proper head placement with appliances			
3) Leak test completed and documented				F. Utility controls / Auto shutoffs installed			
4) Leak test supplies available at event				SOLID FUEL SAFETY (WOOD, CHARCOAL, OTHER SOLID FUEL USE)			
5) Flex connector at regulator/fixed pipe				1) No fuel storage above appliances/vents			
6) Gas detector installed and tested				2) Fuel storage >3 ft to cooking appliance			
7) Container within 10 yr manufacturer date				3) Fuel storage not near any combustibles			
8) Tank Condition (rust, pits, dents, damage)				4) Fuel storage not in path of ash removal			
9) Hose assembly marked for LPG use				5) Fuel storage not near removed ashes			
10) Hose equipped with factory fittings				6) Firebox emptied minimum once per day			
11) No CSST Piping installed in trailer/truck				7) Ash stored in closed, metal container			
12) Gas connections/ T's located beneath unit				8) Removed ash > 3 ft. to any appliance			
13) Grommets around all pipe penetrations				TENT/CANOPY/MEMBRANE STRUCTURE			
LPG CYLINDERS THAT APPEAR TO BE OVERFILLED OR HAVE ANY DISCREPANCIES MUST BE FROM THE REMOVED PROPERTY PRIOR TO THE EVENT				1) Original Manufacture Label present			
OPERATIONAL SAFETY				LABEL MUST PROVIDE INFORMATION ON SIZE, FABRIC AND FIRE RESISTANCE RATING			
1) Hot surfaces attended at all times				2) No Smoking / Exit Signs posted			
2) Gas valves closed when not in use				3) No Flammable liquids inside tent / canopy			
3) Cooking equipment in clean condition				4) No combustible material inside tent / canopy			
4) Operate units with vents / window open				5) Properly secure / fastened down			

This APPROVED inspection form serves as your permit (in [Russellville](#)) for one (1) year from this date. Any modifications or alterations of appliances, operating procedures, or safety equipment may void this permit, and the Fire Marshal's office shall be notified to schedule a re-inspection.

CORRECTIVE ACTION SHALL BE CARRIED OUT IMMEDIATELY TO CORRECT ALL VIOLATIONS NOTED.

THE FIRE MARSHAL'S OFFICE DOES NOT GRANT PERMISSION OR APPROVAL OF A BUSINESS/OPERATION WHERE VIOLATIONS EXIST.

NOTIFY THIS OFFICE AS CORRECTIVE ACTIONS ARE COMPLETED.

FIRE OFFICIAL: _____ OCCUPANT: _____