



DANIEL P. McCOY  
County Executive

ELIZABETH F. WHALEN, MD, MPH  
Commissioner of Health

**DEPARTMENT OF HEALTH**  
COUNTY OF ALBANY  
175 GREEN STREET  
ALBANY, NEW YORK 12202

*The Dr. John J.A. Lyons*  
ALBANY COUNTY HEALTH FACILITY  
(518) 447-4580 FAX (518) 447-4698  
[www.albanycounty.com](http://www.albanycounty.com)

MARIBETH MILLER, BSN, MS  
Assistant Commissioner for Public Health

SHANNA F. WITHERSPOON, MPA  
Assistant Commissioner Finance and  
Administration

## **MOBILE VENDOR / PUSH CART INSTRUCTIONS**

Dear Mobile Vendor Operator:

In order to apply for a permit to operate, please arrange an inspection of your food service vehicle/pushcart by phoning (518) 447-4625 after March 1<sup>st</sup>.

Our inspection cannot be performed unless your vehicle/pushcart is in operational condition.

All inspections will be performed at the Department's Parking Lot, S. Ferry and Green Streets, Albany: Inspections are available on these days only by appointment.

**Mon. & Weds.: morning 10am-11:30am / afternoon 1pm-3:30pm**  
**Tuesday: mornings only.**

---

## **MOBILE VENDOR REQUIREMENTS ON DATE OF INSPECTION**

1. Completed Mobile Vendor Application.
2. Commissary Letter(s).
4. Menu of items being served.
5. Fee Due: \$ 290.00 (additional \$ 25.00 if frozen dessert required)
6. You must provide CERTIFICATE proof of employee insurance:  
Workers' Compensation & Disability Benefit Insurance -or-  
NYS WCB form CE-200: Certificate of Attestation of Exemption.

**NO PERMIT WILL BE ISSUED WITHOUT THE CERTIFICATE(S) OF  
INSURANCE**

**ENVIRONMENTAL HEALTH SERVICES: PH (518) 447-4625 FAX (518) 447-4698**