

COMMISSARY AGREEMENT

A “commissary” is a food establishment with a valid Department of Health permit that serves as a support kitchen for another food establishment(s) (lunch wagons, carts, boats, kiosks, meal serving sites, food manufacturer, etc.).

Commissary

Name of Commissary (dba)	Permit No.
Street Address of Commissary	Phone No.
Owner Name (Corp., LLC, Partnership, Sole Owner, Other)	
Commissary Use Authorized By:	
_____ Signature of Commissary Owner/Authorized Person	_____ Date
_____ Print Name of Commissary Owner/Authorized Person	_____ Title

Food Establishment Using Commissary Above

Name of Food Establishment (dba)	Permit No. (Renewal Only)
Owner Name (Corp., LLC, Partnership, Sole Owner, Other)	
The operations conducted in the commissary will include (check all that apply):	
<input type="checkbox"/> Cold storage of food products	
<input type="checkbox"/> Dry storage of food products	
<input type="checkbox"/> Food preparation (preparing, cutting, cooking, cooling, reheating, repackaging, etc.)	
<input type="checkbox"/> Cleaning/Sanitizing of equipment and utensils	
<input type="checkbox"/> Servicing water system (filling potable water and disposal of wastewater)	
<input type="checkbox"/> Other (list): _____ _____	
Expected scheduled usage of commissary (circle all that apply):	
Days:	Sun Mon Tues Wed Thurs Fri Sat
Hours:	_____
_____ Signature of Food Establishment Owner/Authorized Person	_____ Date
_____ Print Name of Food Establishment Owner/Authorized Person	_____ Phone Number of Owner/Authorized Person