



**Island County Public Health**  
Environmental Health - Food Safety Program  
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## 9. Commissary Agreement

Food Establishment Name: \_\_\_\_\_

Mobile and temporary food establishments may be required to use a commissary for various food preparation or Servicing Area activities (Mobile). "Commissary" means an approved food establishment where food is stored, prepared, portioned, or packaged for service elsewhere. This agreement signifies that both parties agree to vendor's use of facilities for services listed below. Vendor may not use a different Commissary without prior approval; the agreement must be renewed with every renewal or reissuance of a permit and is not transferable. This agreement is independent of any other agreements made between the Commissary and the vendor.

Food Establishment Name: \_\_\_\_\_ Operator/Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Commissary Kitchen Name: \_\_\_\_\_ Operator/Owner: \_\_\_\_\_

Commissary Address: \_\_\_\_\_ Permit/License Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

My estimated times of use of the Commissary are:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Date/Time							

I am to use this Commissary for the following (check all that applies):

Storage       Preparation       Ware washing       Other: \_\_\_\_\_

I will also use the Commissary as a Mobile Food Unit Servicing Area (check all that applies):

Potable Water       Waste Disposal       Mobile Unit Cleaning       Other: \_\_\_\_\_

\*I, the Commissary user, contest the above information is true to the best of my knowledge and understand my food establishment license/permit is allied to my use of the listed Commissary and shall be renewed in accordance with my license/permit.

Commissary User's Signature      Date

Commissary User's Printed Name

I, the Commissary kitchen owner, agree to allow the Commissary user to use the Commissary kitchen for the activities as indicated above and to allow open access to the Commissary kitchen during agreed operating times:

Commissary Owner's Signature      Date

Commissary Owner's Printed Name

Note: This form will be required to be submitted annually during permit/license renewal.

Office Use Only	
EHS Approval:	Date:
Comments:	