



# St. Joseph County Health Department

## Shared Food Facility/Commissary Agreement

This form may be submitted with requests for a Mobile, Push Cart or Mobile Food Truck Permit, or when a prospective food establishment will use a permitted facility as its base of operation. Food sold or given away to the public must be prepared and stored in an approved facility/commissary. Mobile vehicles, push carts or trucks must return to the approved facility/commissary daily for restocking and servicing; they may also need to be stored there.

**This form is to be completed by the Owner (or Manager) of the permitted facility allowing its use as a commissary. The commissary agreement must be renewed annually.**

No other facility may be used by this business for these operations without the written approval of St. Joseph County Health Department Food Service Division.

Name of Business Applying for Food Permit: \_\_\_\_\_

Name of Approved Food Facility/Commissary: \_\_\_\_\_

Commissary Address: \_\_\_\_\_

Commissary Phone: \_\_\_\_\_

Health Permit for the Approved Food Facility/Commissary issued by: \_\_\_\_\_  
(County)

### Onsite food handling procedures/operations:

- \_\_\_ Food preparation
- \_\_\_ Food /Utensil storage (designated and labeled area for exclusive use by the business)
- \_\_\_ Vehicle/Cart Storage
- \_\_\_ Washing utensils and equipment
- \_\_\_ Restrooms: **Employee** / **Public** (circle one that applies) available during all hours of food establishment operation.
- \_\_\_ Mop Water disposal facility
- \_\_\_ Other \_\_\_\_\_

As the owner of \_\_\_\_\_, I have given my permission for the business known as \_\_\_\_\_ to use my facility, as their commissary, for the operations indicated. I know that I am ultimately responsible for the maintenance and overall sanitation of this food facility.

Facility/Business Owner (Manager) : \_\_\_\_\_ ( please print)

Facility/Business Owner (Manager): \_\_\_\_\_ (signature)

Date: \_\_\_\_\_