

## Monterey County Health Department Environmental Health Division

1270 Natividad Road, Salinas, CA 93906, (831) 755-4508, FAX (831)755-4555

## COMMISSARY AUTHORIZATION

MFF Business Name		FA	·		
				Vehicle License Numbers	
MFF Business Owner					
MFF Business E-mail					
MFF Owner Address					
City	Zip	Phone			
Name of Food Safety Certified person			Expi	Expiration Date:	
Mobile Food Facility (MFF) 1	reports daily to com	missary at what time?		AM PN	
MFF is stored at commissary					
information if MFF is stored				Ç	
Business Name	Address	s City		Phone #	
pproved Restroom within 2	00 feet & Authoriz	ed Use			
Are you at a stationary location f yes, provide address of state			Operation ——	to <b>DNO</b>	
. 11			G G	Cross Street	
Address	Cit	У	Cross Si	reet	
		Address	Cross St	City	
Restroom Location Business			Cross Si		
Address  Restroom Location  Business :  Business Owner's Name  Business Owner's E-mail		Address	Cross Si	City	
Restroom Location Business Business Owner's Name	Name	Address Signature		City	
Restroom Location Business Business Owner's Name Business Owner's E-mail	Name  FOR MONT	Address Signature  TEREY COUNTY OFFI	ICE USE	City Phone #	
Business Owner's Name Business Owner's E-mail	FOR MONT	Address  Signature  TEREY COUNTY OFFI  He	ICE USE ealth Permit Fee	City Phone # s Current:	
Restroom Location Business Business Owner's Name	FOR MONT SR00 Receipt #	Address  Signature  TEREY COUNTY OFFI  He	ICE USE ealth Permit Fee	City Phone # s Current:	

## **Commissary Information and Authorization** (to be completed by Commissary owner/authorized representative) Commissary FA Business Hours: \_\_\_\_\_ AM to \_\_\_\_\_ Commissary Business **Business Owner** Commissary Business Address City Zip Phone has permission to - of -MFF Owner MFF Name use the above food establishment as a commissary. The commissary shall accommodate the MFF business owner with the following functions: 1. ☐ Disposal of garbage and rubbish from vehicle. 2. □ Disposal of liquid waste from vehicle (waste water – must dispose into sewer, cooking oil – dispose in containers.) 3. □ Supply of potable water for vehicle water holding tank(s). 4. □ Storage of food and related supplies. Storage area/shelves must be identified for dry products and for refrigerated products with MFF's business name. 5. □ Supply food products. 6. ☐ Use of utensil washing facilities. 7. Supply ice. Provide Business Name and Address if supplied from other location: 8. \(\sigmu\) Use of facility for cleaning and servicing vehicle(s). Facility must have proper waste water sewer connection. Provide Name, Address and City of other location if not available at commissary: 9. ☐ Use of food preparation facilities. The following foods are prepared at the commissary: The California Retail Food Code (CalCode) requires that Mobile Food Facilities operate from approved food establishments. MFF's are to report to the commissary at least once each operating day for cleaning and servicing operations. I agree to immediately notify Monterey County Environmental Health if the vehicle business owner/operator discontinues use of the commissary. Name of Commissary Owner/Authorized Representative Signature Date E-mail of Commissary Owner/Authorized Representative Commissary Authorization Located Outside Monterey County The following must be completed by the local Environmental Health inspection agency for commissaries located outside of Monterey County. This department does not object to the listed food establishment being used as a commissary for the above business. The food establishment has: Current Permit to Operate issued by this department **Expiration Date** Registered Environmental Health Specialist Date Phone # County of

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