

Skagit County Public Health

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**Commissary Exemption Request for Mobile***Complete both sides of form***Mobile Name:** _____ **Operator Name:** _____**Storage of mobile operation when not in operation** – provide business name and street address:

Describe each food to be stored and prepared on the mobile in the table below. **All storage, preparation, cold holding, cooking, hot holding must occur on the mobile. Specify under Food if this is a commercially pre-washed, pre-cut item.**

FOOD	PURCHASED FROM WHAT SOURCE?	Wash, Cut, or Chop	REFRIGERATE	COOK	HOT HOLD
		☐	☐	☐	☐
		☐	☐	☐	☐
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Describe all equipment on the mobile to be used for the following activities. Please provide make and model or detail on the equipment.

Cooking Equipment: _____

Hot Holding Equipment: _____

Refrigeration or Cold Holding Equipment: _____

Sinks: _____

Preparation surfaces and utensils: _____

Dimensions in inches of each compartment of 3 compartment of: Depth _____ Width _____ Length _____

Dimensions in inches of largest equipment to be washed in sink: Depth _____ Width _____ Length _____

Describe how and where the mobile unit will be cleaned and where cleaning supplies are stored on the mobile:

How will the mobile be serviced? Specify how often and where- (ex. Storage location connection to XYZ Group A Public Water Systems, wastewater tank emptied at XYZ public dump station, waste water tank pumped by XYZ licensed septic pumper, covered dumpster located at operation locations for emptying garbage cans etc)

Potable Water: _____

Wastewater: _____

Garbage: _____

Describe all sources of power for the mobile. Be specific for each operations location and storage location. You must be able to keep hot and cold holding equipment powered at all times when time temperature control for safety food is on the mobile.

Describe how the mobile will be protected from environmental contamination when not in use:

PERMIT HOLDER AGREEMENT

I, _____, as the Permit Holder of this mobile food establishment agree to comply with the following requirements in order to safely operate my mobile food service without the use of a commissary kitchen or formal servicing area.

- The mobile food unit contains all equipment and utensils needed for complete onboard preparation of an approved menu;
- The mobile food unit is protected from environmental contamination when not in use;
- The mobile food unit can maintain required food storage temperatures during storage, preparation, service, and transit;
- The mobile food unit has a dedicated handwashing sink to allow frequent handwashing at all times;
- The mobile food unit has adequate water capacity and ware washing facilities to clean all multiuse utensils used on the mobile unit at a frequency specified in state board of health rules;
- The mobile food unit is able to store tools onboard needed for cleaning and sanitizing;
- All food, water, and ice used on the mobile food unit is prepared onboard or otherwise obtained from approved sources;
- Wastewater and garbage will be sanitarilly removed from the mobile food unit following an approved written plan or by a licensed service provider

Signature: _____ Date: _____
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Plan reviewed by Health Department Food Safety Staff: _____ Date: _____

Plan Approved: ☐ Yes ☐ No