

## **ENVIRONMENTAL HEALTH**

1250 Hollipark Drive Idaho Falls, ID 83401 OFFICE (208) 523-5382 FAX (208) 528-0857

## SHARED FOOD FACILITY / COMMISSARY AGREEMENT

This form is to be submitted with proposals for a Vehicle or Cart Permit, Temporary/Intermittent Food Facility Permit, Catering Permit or Farmers' Market Food Vendor permit. The State of Idaho Food Code requires that foods sold or given away to the public be prepared and stored in an approved facility. In addition, the vehicles or carts used in the sale of those foods must be serviced and, sometimes, stored at an approved facility.

THIS FORM IS TO BE COMPLETED BY THE OWNER (OR MANAGER) OF THE APPROVED FOOD FACILITY where these operations will take place for the business applying for a permit. No other facility may be used by this business for these operations without the written approval of Eastern Idaho Public Health.

Name of Business applying for permit:	
Name of Approved Food Facility / Commissary:	
Address:	
City/State/Zip:	
Phone:	_ Commissary License #:(Approved/Licensed facility)
Operations to take place:	(Approved/Licensed facility)
Food Preparation Food/Utensil storage (Designated and labeled area for exclusive use) Vehicle/Cart Storage Washing of utensils and equipment Other:	
As the owner of the above approved food facility, I have given my permission for the business known as to use my facility for the	
operations indicated. I know that I am ultimately responsible for the maintenance and sanitation of the food facility.	
Owner of Approved Facility/Commissary (please print)	):
Signature of Approved Facility/Commissary Owner/Ma	anager:
Date:	