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**COUNTY OF KINGS**

**DEPARTMENT OF PUBLIC HEALTH**

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**COMMISSARY LETTER  
New or Annual Renewal**

A commissary is a food facility with a health permit that services vending machines and mobile food facilities such as food vending trucks or carts.

The following person has my permission to use my food facility as a commissary:

**APPLICANT**

\_\_\_\_\_  
BUSINESS OR VEHICLE NAME

\_\_\_\_\_  
BUSINESS OPERATOR'S NAME

My food facility currently has a permit issued by \_\_\_\_\_ County.

**COMMISSARY**

\_\_\_\_\_  
COMMISSARY NAME

\_\_\_\_\_  
COMMISSARY ADDRESS

\_\_\_\_\_  
COMMISSARY PHONE

\_\_\_\_\_  
COMMISSARY CITY

My business will provide that person with the following commissary services (please check):

- Supply food products**
- Storage of frozen foods**
- Storage of refrigerated foods**
- Storage of dry food and food related products**
- Cleaning and service operations**

Mobile food facilities like food vending trucks and carts must operate out of an approved commissary. They must report to the commissary at least once each operating day for cleaning and servicing. If the operator discontinues use of the commissary, please notify this Department immediately by calling (559) 584-1411.

\_\_\_\_\_  
Signature of Commissary Operator

\_\_\_\_\_  
Date

H/forms/forms 2009/Commissary Form Revised 6/2/2009