

# Authorization for Commissaries Located Outside of Kern County

(Part 2 of 2)

The following information must be completed by the **commissary owner/permittee**  
and must have an original signature.

**The following services governed by Section 114326 of the California Retail Food Code are provided for the  
aforementioned Mobile Food Facility and are indicated by my initials as follows:**

Initials			Initials
	Adequate cold and dry storage for food, utensils, and other supplies. Storage area for my food and supplies are separated from the Mobile Food Facility's food and supplies.	A food preparation area for mobile food facilities that conduct food preparation.	
	Potable water for filling water tanks.	Approved disposal system for the disposal of waste water and grease.	
	Three compartment sink for sanitizing utensils.	Approved disposal area for the disposal of garbage and refuse.	
	Hot and cold water under pressure and a designated area for cleaning the vehicle.		

I, the owner/permittee of this facility, will allow my facility to serve as a commissary for this Mobile Food Facility. I understand that as a commissary for the Mobile Food Facility, I must allow the mobile unit to return for servicing on a daily basis.

**I agree to comply with the provisions of Section 114326 of the California Retail Food Code. I certify that the information provided is true and correct to the best of my knowledge. It is a misdemeanor to knowingly make any false statement in connection with an application.**

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Signature of Commissary Owner Print Name Date

**I, the owner/permittee of the Mobile Food Facility, agree to use this food facility as a commissary for servicing on a daily basis. I will use the commissary for the requirements noted above. If I do not use the commissary, my Environmental Health Permit will be revoked, and I must stop operating until I obtain another commissary and provide proof to the Kern County Public Health Services Department, Environmental Health Division.**

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Signature of Mobile Food Facility Owner Print Name Date

**OFFICE USE ONLY**

Authorized By: \_\_\_\_\_ Date: \_\_\_\_\_