

Greene County Environmental Health

227 Kingold Blvd., Suite B
Snow Hill, NC 28580

Phone (252) 747-8183

COMMISSARY FORM **PUSHCART/MOBILE FOOD UNIT**

Mobile Food Unit Commissary – A permitted food establishment approved by the regulatory authority to serve as a base of operations for a mobile food unit or pushcart OR a vehicle with food service equipment designed to be readily moved that also serves as its own base of operation. It is a self contained commercial kitchen on wheels that is fully enclosed with floors, walls, ceilings with mechanical refrigeration that shall meet all of the sanitation requirements of a permitted commissary in the 2017 Food Code as amended by 15A NCAC 18A .2600, **RULES GOVERNING THE FOOD PROTECTION AND SANITATION OF FOOD ESTABLISHMENTS** AND RULES .2670 AND .2672.

Approval is based on food sources, menu with simple food processes and strict compliance relating to potable water source, waste water disposal location/frequency and operations schedule including restroom accessibility.

This form should be submitted prior to submitting the pushcart/mobile food unit application and fee for plan review.

Pushcart Name: _____

Mobile Food Unit Name: _____

Applicant Name: _____

Address: _____

City: _____ ZIP: _____ County: _____

Phone: _____

Email: _____

Name of food establishment (if applicable) serving as commissary: _____

Address: _____

Phone Number: _____

Food Establishment Permittee: _____

For the Commissary owner: By signing below, I confirm that I agree to allow my foodservice establishment to serve as a commissary for the Mobile Food Unit or Pushcart named above. I understand that I must allow the Mobile Food Unit or Pushcart to return for servicing on a daily basis. I agree to provide an exterior wastewater dumping site approved by the local Registered Environmental Health Specialist (REHS), provide an exterior protected connection to the potable water supply as approved by the local REHS, designate refrigerator or dry storage area for food or utensil storage, and allow use of my warewashing facility to wash utensils used on the unit.

Signature of Food Establishment Permittee

Date

AFFIDAVIT OF PROPERTY USE

A mobile food unit/pushcart owner shall have consent to operate their unit at a particular location. If a mobile food unit is applying to serve as its own commissary, the owner must have permission to use certain amenities at the set up location.

_____ Mobile Food Unit

_____ Pushcart

Name of unit: _____

Owner's name: _____

Owner's address: _____

Phone number: _____ Email: _____

Set up information:

<i>Locations</i>	<i>Days/Times</i>	<i>Signature of Property Owner</i>

Having signed above, the property owner states he/she is owner of the property and he/she has authorized the mobile food unit/pushcart unit to set up, use the property (water & wastewater supply if approved), and have access to a properly supplied restroom facility on the premises.

I hereby certify that the information provided within this application is accurate and I fully understand that any deviation or variance from this application without prior written permission from Greene County Environmental Health will prevent the issuance of a permit to operate this unit. I understand this application will be returned to me if incomplete and will delay processing. I also understand that multiple inspections of the unit may be required and if the unit is not in compliance with ***RULES GOVERNING THE SANITATION OF FOOD ESTABLISHMENTS 15A NCAC 18A .2600***, a permit will not be issued. Approval of these plans does not indicate compliance with any other code, law, or regulation that may be required (i.e.federal, state, local).

Signature of Mobile Food Unit/Pushcart Owner: _____ Date: _____