



Putnam County Health Department

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COMMISSARY/COMMERCIAL KITCHEN/SHARED KITCHEN AGREEMENT

The Commissary/Commercial Kitchen Agreement allows the named vendor access to the commissary and its facilities during days of operation. PCHD may contact commissary to verify vendor usage and agreement. **This commissary agreement is valid for the current calendar year only.**

Name of commissary: _____		
Address: _____		
Street	City/State	Zip Code
Commissary Authorized Individual: _____		Commissary Food License # _____
Name		Title/Position

STATEMENT OF COMMISSARY/COMMERCIAL KITCHEN/SHARED KITCHEN AGREEMENT

This agreement is to be completed and signed only by the duly authorized owner, manager, or representative of the licensed franchise/corporation.

I, _____ do hereby grant permission for
Name Title/Position

_____ to use
Mobile Food Operator/Shared Kitchen User

_____ facilities at any time to perform the following:
Commissary/Commercial Kitchen/Shared Kitchen

(check all that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Food preparation | <input type="checkbox"/> Equipment storage | <input type="checkbox"/> Dumping wastewater |
| <input type="checkbox"/> Food storage
(cooler/freezer) | <input type="checkbox"/> Ware-washing
equipment and utensils | <input type="checkbox"/> Chemical/supply |
| <input type="checkbox"/> Dry food storage | <input type="checkbox"/> Vehicle/cart storage | <input type="checkbox"/> Trash disposal |
| <input type="checkbox"/> Ice production | <input type="checkbox"/> Filling of water tanks | <input type="checkbox"/> Used cooking oil disposal |
| | | <input type="checkbox"/> Other services |

Signature of Authorized Individual of Commissary/Commercial Kitchen/Shared Kitchen

Date Signed

Signature of Mobile Food Operator/Shared Kitchen User

Date Signed

Failure to report to the commissary at least once each day of operation is a violation of 410 IAC 7-26-488 and could result in permit suspension.