



Onondaga County Health Department

J. Ryan McMahon, II, County Executive

Kathryn Anderson, MD, PhD, MSPH, Commissioner of Health

John H. Mulroy Civic Center • 421 Montgomery Street, Syracuse, NY 13202



Division of Environmental Health
Jeffrey Till, Director

Food Protection Section
Phone (315) 435-6607 • Fax (315) 435-6606
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COMMISSARY AGREEMENT (Mobile Units, Pushcarts, Caterer)

A commissary is a place where food is stored, processed or packaged and prepared in individual portions for service at a food service establishment. A commissary supplying vending machines, mobile food service establishments, or owned and operated by an owner operating the food service establishment exclusively served by the commissary, is to be operated under permit and in accordance with New York State Sanitary Code Subpart 14-1.

Section 1 – To be completed by PERMIT APPLICANT

Business Name _____

Owner/Operator Name _____

Type of Operation Mobile Unit/Pushcart Caterer Bakery

Note: This Commissary Agreement will expire on January 31st of each calendar year. If agreement is modified or cancelled, you must notify this department immediately by calling 315-435-6607.

Section 2 – To be completed by COMMISSARY OWNER/OPERATOR

Commissary Name _____

Street Address _____

City _____ Zip _____ Phone _____

Permit/License Number _____ *(Please attach a copy of the permit/license if commissary is not currently permitted by Onondaga County Health Department)*

Check appropriate services provided by your commissary:

- | | |
|---|---|
| <input type="checkbox"/> Food preparation | <input type="checkbox"/> Mop sink |
| <input type="checkbox"/> Food and utensil Storage | <input type="checkbox"/> Handwashing facilities |
| <input type="checkbox"/> Three compartment sink | <input type="checkbox"/> Toilet facilities |
| <input type="checkbox"/> Wastewater disposal | <input type="checkbox"/> Refrigeration equipment |
| <input type="checkbox"/> Hot and cold potable water | <input type="checkbox"/> Food preparation equipment |
| <input type="checkbox"/> Disposal of garbage/refuse and oil | <input type="checkbox"/> Other _____ |

Owner/Operator of Commissary (please print) _____

Signature _____ Date _____