PUSHCART AND MOBILE FOOD UNIT
COMMISSARY AGREEMENT
Brunswick County Health Services, Environmental Health Section
25 Courthouse Drive NE ▪ P. O. Box 9
Bolivia, NC 28422
(910)253-2150

Email: flplans@brunswickcountync.gov

COMMISSARY

Establishment Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Owner/Contact: _____

Phone: _____ **Email:** _____

I agree to allow this food service establishment to serve as a commissary for the pushcart/mobile food unit listed below. The following facilities within this establishment will be available for operation and servicing of the mobile food unit/pushcart:

☐ Fresh Water Supply   ☐ Freezer Storage Space
☐ Wastewater Disposal   ☐ Dry Storage Space
☐ Garbage Disposal   ☐ Dish Storage Space
☐ Oil Disposal/Recycle   ☐ Ware Washing Equipment
☐ Food Prep Sinks (Washing, Thawing, Cooling)   ☐ Chemical Storage Space
☐ Refrigerated Storage Space   ☐ Use of Cooking Equipment

These facilities are available for use by the pushcart/mobile food unit operator at the following times:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Owner/Operator Name (Print): _____

Signature: _____

Date: _____

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PUSHCART/MOBILE FOOD UNIT

Establishment Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Owner/Operator Name (Print): _____

Signature: _____

Date: _____