SERVICING AREA AGREEMENT (APPENDIX III)

TYPE or PRINT IN INK. Enter N/A where requested information does not apply. Leave NO BLANK SPACES.

TYPE OF MOBILE FOOD ESTABLISHMENT:	TYPE 3	
MOBILE FOOD ESTABLISHMENT NAME:		
OWNER(S) NAME:	PHONE NO:	
TO BE COMPLETED BY SERVICING AREA OWNER/OPERATOR		
· · · · ·	ollowing services to the abo	
Approved Potable Water Source	🗌 Food Preparatic	on Area
 Waste Water Disposal Cleaning Area for MFE Overnight Storage of MFE Overnight Refrigeration 	 Food Storage Area Utensil Washing Area Equipment and Utensil Storage Area Prepackaged Foods for Retail Sale 	
SERVICING AREA NAME:		
OWNER/MANAGER:		
ADDRESS:	CITY/STATE	ZIP:
PHONE NUMBER:	FAX NUMBER:	
EMAIL ADDRESS:		
FOOD ESTABLISHMENT PERMIT ISSUED BY: (ATTACH COPY OF PERMIT/LICENSE ISSUED BY REGULA	P TORY AGENCY)	ERMIT #:
I give permission to the above listed Mobile Fo at the above address.	ood Establishment Operator	to use my establishment located
SIGNATURE:	DATE:	
TITLE:		

October 2013