



SHARED FACILITY AGREEMENT

SUBMIT COMPLETED AGREEMENT AND APPLICATION TO THE APPROPRIATE REGIONAL OFFICE

A shared facility is one in which one or more food businesses with different owners are using the same physical food facility but at different times of operation. Each food business owner using this kitchen must have their own license or registration.

TYPE OF FACILITY/BUSINESS USING THE SHARED KITCHEN:

- Retailer, Limited Food Establishment, Catering (Retail), Wholesaler/Distributor/Storage, Processor/Manufacturer

NAME OF FACILITY (BUSINESS) (Common Public Name):

LEGAL OWNER:

Owner Name, Owner phone number, Owner e-mail address

TO BE COMPLETED BY SHARED FACILITY OWNER/OPERATOR

FACILITY NAME:

FACILITY ADDRESS:

Facility street number and name, City, State, Zip code

FACILITY OWNER:

Owner Name, Owner phone number, Owner e-mail address

RETAIL FOOD FACILITY LICENSE ISSUED BY: Name of Jurisdiction

LICENSE #: (ATTACH COPY OF LICENSE ISSUED BY REGULATORY AGENCY)

This facility will be providing the following services to the above-mentioned business owner/operator on a:

- Daily basis, Weekly basis, Other, Explain:

The other owner listed above will be using:

- Entire Facility will be used, Only the following will be used (Check ALL that apply): Approved Potable Water Source, Approved Waste Water Disposal, Equipment/Utensil Warewashing Area, Use of Refrigeration/Freezers, Handwashing Sinks, Food Preparation Area including equipment, Food Storage Area, Equipment and Utensil Storage Area, Employee Restrooms, Other:

I give permission to the above listed Facility Operator to use my facility located at the above address.

SIGNATURE, TITLE, DATE