



**CONTRA COSTA ENVIRONMENTAL HEALTH DIVISION**  
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**COMMERCIAL/PRODUCTION KITCHEN AGREEMENT  
 FOR TEMPORARY FOOD EVENT VENDORS**

**1. TO BE COMPLETED BY FOOD VENDOR**

Name of Event: \_\_\_\_\_

Event location: \_\_\_\_\_ Event Date(s): \_\_\_\_\_

Food Vendor Name: \_\_\_\_\_ Food Booth Name: \_\_\_\_\_

Mailing Address (City, State, Zip): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

I hereby declare that the above information is current, true and correct to the best of my knowledge and agree to use the Commercial/Production Kitchen in accordance with the California Health and Safety Code.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2. TO BE COMPLETED BY COMMERCIAL/PRODUCTION KITCHEN OWNER**

Commercial/Production Kitchen Name: \_\_\_\_\_

Facility Address (City, State, Zip): \_\_\_\_\_

Operator Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

- I will provide the Food Vendor in Section 1 with access to the following (if available):
- Hand washing sinks
  - Food preparation area
  - Food preparation sink
  - 3 Compartment warewash(dish) sink
  - Refrigerator/Freezer storage
  - Cooking equipment
  - Dry food storage
  - Ice machine or food cooling equipment
  - Potable water
  - Disposal receptacle(s) (ex. Trash, recycle, organics)
  - Equipment storage
  - Chemical Storage
  - Restroom with hand washing sink
  - Mop sink

I certify the Food Vendor in Section 1 is operating at the above Commercial/Production Kitchen.

Owner Printed Name: \_\_\_\_\_ Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**3. TO BE COMPLETED BY OUT OF COUNTY AGENCY**

The above listed Commercial/Production Kitchen is permitted in \_\_\_\_\_ County.

The above listed Commercial/Production Kitchen inspection status is compliant and has capacity for this Food Vendor.

REHS Printed Name: \_\_\_\_\_ REHS Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**FOR OFFICE USE ONLY**

FA#:	TE#:	PE#:	Received By:	Date Received:	Assigned to:
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