



South Carolina
DEPARTMENT OF AGRICULTURE
RETAIL FOOD SAFETY & COMPLIANCE DEPARTMENT
350 Ballard Court, West Columbia, SC 29172

Hugh E. Weathers, Commissioner

RETAIL FOOD ESTABLISHMENTS MOBILE FOOD ESTABLISHMENT SUPPLEMENTAL

Form must be submitted to the SCDA to document the relationship between the commissary and mobile food unit/mobile food pushcart for all new and existing (permitted) operations. (8-302.14(A)(1), (9-1 (L)(8), (9-5)(C)).

The **Mobile Food Establishment** consists of a commissary and mobile food unit or mobile food pushcart (9-1). The Mobile Food Establishment (commissary and mobile food unit/mobile food pushcart) must be constructed and operated in compliance with all requirements of Regulation 61-25, Retail Food Establishments that apply.

COMMISSARY INFORMATION

Facility Name _____ Owner/Operator _____
Facility Address _____ City _____ Zip _____
County (Location) _____ Permit Number _____
Phone _____ Email _____

MOBILE FOOD UNIT / MOBILE FOOD PUSH CART INFORMATION

Mobile Food Unit/Mobile Food Pushcart Name _____
Owner/Operator _____ Permit Number _____
Mailing Address _____ City _____ State _____ Zip _____
Phone _____ Email _____

☐ Owned by Commissary

(Check box if the mobile food unit/mobile food pushcart is owned/operated by the commissary, then skip down to the signature lines.)

SUPPORT SERVICES

Parties listed above agree that the mobile food unit/mobile food pushcart will have access to the following support services at the commissary. (Check all that apply)

- ☐ Use of cooking equipment
- ☐ Prepping menu items
- ☐ Food prep sink (washing, thawing, cooling, etc.)
- ☐ Warewashing equipment
- ☐ Drinking water supply
- ☐ Wastewater disposal
- ☐ Refuse disposal (garbage, trash)
- ☐ Servicing area (for cleaning of mobile unit/pushcart)
- ☐ Other _____

Storage space (designated):

- ☐ Refrigerator/cooler
- ☐ Freezer
- ☐ Dry storage
- ☐ Dishes/utensils, single-service items
- ☐ Storage of mobile food unit/mobile food pushcart (If not stored at the commissary, the mobile food unit/mobile food pushcart owner/operator must submit a Request for an Operational Variance (CPD Form #2113) for review and approval.

The mobile food unit/mobile food pushcart will have access to the commissary on the following days and times.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

SIGNATURES

This document is not transferable. Should there be a change in ownership of either the commissary or mobile food unit/mobile food pushcart or should there be any modification or cancellation of this relationship between parties, the Department must be informed immediately (Ch. 8-304.11(B)). Should either facility fail to adhere to the requirements of Regulation 61-25, the permit to operate may be subject to enforcement action, which may include civil penalties pursuant to Section 44-1-150(B) of the South Carolina Code of Laws and/or permit suspension/revocation pursuant to Regulation 61-25, Retail Food Establishments.

Commissary Owner/Person in Charge

Name (print)

Submittal Date

Mobile Unit/Cart Owner/Person in Charge

Name (print)

Submittal Date

RETURN BY EMAIL OR MAIL TO

SCDA Retail Food Safety & Compliance
retailfood@scda.sc.gov

350 Ballard Court
West Columbia, SC 29172

Public information provided on this document is subject to public scrutiny or release.



South Carolina
DEPARTMENT OF AGRICULTURE
RETAIL FOOD SAFETY & COMPLIANCE DEPARTMENT
350 Ballard Court, West Columbia, SC 29172

Hugh E. Weathers, Commissioner

INSTRUCTIONS FOR COMPLETING MOBILE FOOD ESTABLISHMENT SUPPLEMENTAL

Audience: Form to be completed by the commissary owner/operator and the mobile food unit/mobile food pushcart owner/operator.

Purpose: This form is to provide information on the support relationship between the commissary and the mobile food unit/mobile food pushcart.

Instructions:

Commissary Information—*To be completed by the commissary owner/operator.*

1. Provide the permit number (If permitted. The number is located on the most recent routine inspection report.).
2. Provide the facility name.
3. Provide the physical address to include city, and zip code.
4. Provide the county in which the commissary is located.
5. Provide phone number (including area code).
6. Provide email address used for the facility.

Mobile Food Unit/Mobile Food Pushcart Information—*To be completed by the mobile food unit/mobile food pushcart owner/operator.*

1. Provide the permit number (If permitted. The number is located on the most recent routine inspection report.).
2. Provide the mobile food unit/mobile food pushcart name.
3. Provide the mailing address to include city, state, and zip code.
4. Provide phone number (including area code).
5. Provide email address used for the mobile food unit/mobile food pushcart.
6. Check the box if the commissary and the mobile food unit/mobile food pushcart have the same owner/operator, then skip down to the signatures section of the form.

Support Services—activities performed at the commissary—*To be completed by the commissary **and** mobile food unit/mobile food pushcart owners/operators.*

1. Check the box next to each agreed support service that the mobile food unit/mobile food pushcart will have access to at the commissary.
2. Below the days of the week in the chart, provide the time frame that the mobile food unit/mobile food pushcart operation will have access to the commissary to perform the checked servicing activities.
For example: Sunday 7 – 9 am, Monday 2 – 3 pm, etc.

Signatures—*Form must be signed by both parties. Include the printed name of each party and the date of submittal.*

1. Commissary owner/operator.
2. Mobile food unit/mobile food pushcart owner/operator.

Office Mechanics & Filing: Retention schedule for this form is: 11701 – Retail Food Establishments.