CITY AND COUNTY OF DENVER

DEPARTMENT OF ENVIRONMENTAL HEALTH
Nancy J. Severson, Manager

201 W. Colfax Ave.
DEPT. 1009
DENVER, CO 80202
PHONE: (720) 865-5401
FAX: (720) 865-5532
www.denvergov.org/phi

JOHN W. HICKENLOOPER
Mayor

☐ Mobile
☐ Pushcart
☐ Peddler
☐ Temporary

Affidavit of Commissary

Business/Trade Name_____

Business Address_____

Contact Telephone Number_____

I (print name)_____
Last First MI

As representative of the above named company offer this affidavit as proof that my food product is being prepared in a licensed facility that is currently under inspection by a health department. This is in accordance with the laws governing mobile and temporary food vendors in the City and County of Denver (Article III, Chapter 23 of the Denver Revised Municipal Code). I also acknowledge that if I cease to use this facility a new affidavit must be submitted for approval before I can resume selling my food product.

I (print name) _____
Last First MI

As an owner/representative of this facility do hereby confirm that (print name)

_____
Last First MI

Has permission to prepare their product in this facility (print name of commissary)

_____

Which is located at (address of commissary)_____

The phone number of the commissary is: (_____)_____

This is a licensed facility, which is being inspected by (name of health dept.)_____
And does not have a liquor license. I do hereby confirm that the above information is true by signing below on the appropriate line.

_____ _____
Signature of Owner/Representative(Commissary) *Date*

_____ _____
Signature of proposed mobile/temporary food vendor *Date*

Do Not Write Below This Line

Inspector Name_____ Inspector #_____

Inspector Signature_____ Date_____

Jmn 6/02