

Affidavit of Commissary

Completed by Business Operator

Business Name: _____ Business LLC/CORP: _____

Owner/Operator Name: _____

Operator Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Operator Email: _____ License Plate: _____

Operator Telephone Number: _____ CBD Products (Y / N)?: _____

As owner/representative of the above-named business, I offer this affidavit as proof that my food will be prepared in a licensed food facility in accordance with the laws governing the designated business type in the City and County of Denver's Food Establishment Rules and Regulations, Chapter 23 of the Denver Revised Municipal Code. Please initial below:

- I will submit a new affidavit for approval if I cease to use the facility listed below as my commissary **before** I resume selling food.
- I understand that all food must be stored and prepared at the commissary below; **no** food may be stored or prepared in a home.
- I understand that failing to utilize my commissary as required may result in enforcement action.

Note: If you are operating multiple stands/booths, such as Suzy's Tacos #1 and Suzy's Tacos #2, submit separate affidavits to the department for approval.

If applicable, which temporary events are you participating in:

Christkindle Taste of Colorado Cherry Creek Arts 420 Rally Dragon Boat Farmer's Market _____

International Fest Five Points Jazz Fest Cinco de Mayo Juneteeth Other Farmer's Market _____

I affirm that the above information is correct and true by signing below.

 Signature of Proposed Business Operator Date

Completed by Commissary Operator

Commissary Name _____ Commissary Contact Name: _____

Commissary Address: _____ Telephone Number: _____

Commissary is regulated by: Denver Jefferson County Tri-County Other: _____

Commissary Email Address: _____

Commissary Agreement: Start Date: _____ End Date: _____

Commissary is providing the following items for the above noted operator/business:

<input type="checkbox"/> Cold storage	<input type="checkbox"/> Grease Disposal	<input type="checkbox"/> Drinking/potable water hose	<input type="checkbox"/> Dish washing
<input type="checkbox"/> Dry storage	<input type="checkbox"/> Food preparation tables	<input type="checkbox"/> Mobile unit storage	<input type="checkbox"/> Cooking equipment
<input type="checkbox"/> Clean water/ water disposal	<input type="checkbox"/> Ice machine	<input type="checkbox"/> Food preparation sink	<input type="checkbox"/> Cooling equipment

As owner/representative of this facility, I confirm that the operator above has permission to utilize my facility as a commissary for their designated business. I read, understand, and affirm my responsibilities as a commissary operator in accordance with the laws governing commissaries in Chapter 12 of the City and County of Denver's Food Establishment Rules and Regulations, Chapter 23 of the Denver Revised Municipal Code. Please initial the lines below:

- I will notify the Department of Public Health and Environment if the vendor ceases to use this facility as required.
- I will maintain logs/records indicating both the intended schedule as well as the actual schedule in which the above operator uses my facility.
- I understand that failing to adhere to the rules and regulations that govern commissaries may result in enforcement action.

I affirm that the above information is correct and true by signing below.

 Signature of Commissary Operator Date

****ATTENTION:** All asterisked (*) licenses below must have the bottom section completed by PHI, via email or in person, prior to submitting to the Department of Excise and Licenses. Excludes mobiles.

Business Type (please only select one): _____ Change of Commissary / Renewal / New License: _____

Temporary* Wholesaler* Peddler* Caterer* Kiosk* Commissary Change Renewal New

Other: _____

Approved Denied Approved with Conditions: _____

Investigator Name: _____ Investigator Signature: _____ Date: _____

EST ID: _____ INS #(s): _____ BFN #: _____