



ULSTER COUNTY DEPARTMENT OF HEALTH

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PATRICK K. RYAN
County Executive

CAROL M. SMITH, MD, MPH
Commissioner of Health

COMMISSARY LETTER

Commercial Kitchen (Commissary): _____
Permit / License #: _____

Vendor (Business Name): _____

As of _____, 20____

_____ (vendor) has permission to use the licensed commercial kitchen of _____ to prepare, clean and store products related to the day-to-day operations of licensed vendor including:

- Fresh water supply
- Grey water disposal
- Dry/refrigerated food storage
- Ware-washing facilities
- Garbage removal
- Food preparation

Vendor must follow all food safety regulations and any and all rules required by commercial kitchen operator.

This agreement must be renewed at the time of permit renewal. As part of the permit renewal, a copy of Commissary permit/license to operate must be submitted with all required documents.

Vendor Signature

Commercial Kitchen Owner/Operator