



# SHARED FOOD FACILITY AGREEMENT

Environmental Health Division  
5050 Commerce Drive, Baldwin Park, CA 91706  
[www.publichealth.lacounty.gov/eh](http://www.publichealth.lacounty.gov/eh) | (888) 700-9995



This agreement must be signed by both the Permitted Food Facility (PFF) Operator and the Dependent Operator (e.g., Compact Mobile Food Operator (CMFO) or Temporary Food Facility (TFF)).

### DEPENDENT OPERATOR'S BUSINESS INFORMATION

Name of Business:			Program Record#:	
Business Address:	Unit:	City:	Zip:	
Name of Owner(s):				
Mailing Address:	Unit:	City:	State:	Zip:
Email:		Phone Number:		

### PROPOSED DEPENDENT OPERATION

**Where/How will food be sold?**    Mobile Food Facility (MFF)/CMFO    Temporary Food Facility

**Type of Food Service Conducted (check all that apply)**

**Low Risk** – Prepare/package only non-potentially hazardous foods or packaged ice cream bars and paletas.

**Moderate Risk** – Food preparation is limited to preparation for same-day service; prepared foods that are not sold or served the same day are discarded.

**High Risk** – Offer a menu that involves the preparation of potentially hazardous food (PHF) and the PHF travels through the temperature danger zone (41-135°F) more than once.

### HOURS OF OPERATION

DAYS	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
START TIME							
END TIME							

### PERMANENT FOOD FACILITY - EQUIPMENT OVERVIEW

**1. Do you require new equipment that is currently not available in the PFF?**    Yes    No  
If yes, identify the type of equipment (attach Equipment Specification Sheet): \_\_\_\_\_

**2. What equipment/utensils/sinks at the PFF do you plan to use:**

Cooking equipment    Prep tables    Handwashing sinks    Food prep sink    Mop sink

Utensil washing sink    Refrigerator    Other: \_\_\_\_\_

**3. What do you do with leftovers:** \_\_\_\_\_    N/A

### FOOD FLOW OVERVIEW

**FOOD DELIVERY:** All food ingredients must be obtained from an approved source; maintain receipts.

**FOOD STORAGE:** Identify amount of shelving utilized (label with the name of your business):  
Dry Storage \_\_\_\_\_; Refrigerated Storage (41°F) \_\_\_\_\_; Frozen Storage \_\_\_\_\_

### PERMANENT FOOD FACILITY OPERATOR'S INFORMATION

Facility Name:		Contact Person:		Program Record#:
Facility Address:	Unit:	City:	Zip:	
Email:		Phone Number:		

**PERMANENT FOOD FACILITY – CMFO CLEANING AND STORAGE**

To support the cleaning of a CMFO food cart, the PFF must have a wash down area that is protected from the elements and includes hot and cold running water and drainage to a public sewer.

**1. Are there facilities to allow for the proper cleaning of the cart?**  Yes  No

If yes, check each required item:  Wash down space with hot & cold-water lines (if outdoors, must have overhead protection)

Backflow prevention device for water lines  Waste tank disposal of liquid waste (e.g., floor sink, floor drain, trench drain, mop sink)

**2. Is there a potable water connection to fill freshwater tanks?**  Yes  No

**3. Is there a vermin proof area to store the CMFO?**  Yes  No

If no, the Dependent Operator must have an alternative, approved storage location for the CMFO.

**FOOD PRODUCTION:** Describe the following with as much detail as possible. Indicate Not Applicable (NA) as appropriate.  
(\*Equipment – must be NSF approved or equivalent)

PROCESS	IDENTIFY FOOD ITEMS	INDICATE LOCATION AND EQUIPMENT*
Washing of Produce		
Thawing		
Cooking (A food temperature measuring device shall be available)		
Slicing, Chopping or Assembly of Food Items		
Hot Holding (Hot food maintained at 135°F) or above		
Cooling (PHF food will be cooled to 41°F within 6 hours; 135°F to 70°F in 2 hours)		
Reheating (Food must be reheated to a temperature of 165°F for 15 sec within 2 hours)		
Food Transportation (Identify how foods will be protected from contamination and maintained hot/cold)		

**CONDITIONS OF APPROVAL**

- If significant or major violations are noted as a result of sharing the Permanent Food Facility (PFF), Environmental Health (EH) has the right to rescind the permission of use by the Dependent Operator to conduct the food activities as described above.
- EH may conduct inspections and investigate consumer complaints associated with the food business sharing the PFF and any violations noted will be cited on the PFF official inspection report.
- The Dependent Operator must immediately cease all operations in the event that the PFF permit is suspended or that an imminent health hazard exists that includes, but is not limited to a vermin infestation, lack of hot water, a sewage system backup/failure, etc.
- The PFF assumes all responsibility for any health code violations which may occur while the facility is being used for this purpose. Such violations may be included on an inspection report for the PFF and may affect the score and grade of the PFF.
  - I am taking responsibility for all health code violations of the Dependent Operator, while operating in this PFF
  - I am not taking responsibility for all health code violations of the Dependent Operator, while operating in this PFF. The Dependent Operator needs to obtain a separate permit.
- The PFF and Dependent Operator will comply with all applicable laws.
- The PFF will notify EH in writing within 10 days of severance of this agreement.

***I understand this agreement and declare the information above to be accurate and correct.***

**Permanent Food Facility (PFF) Operator**

The person listed below has my permission to prepare food for sale from my facility on the days and time(s) listed above and store food and equipment in my food facility.

Name of PFF Operator/Legal Representative:

Signature:

Date:

**Dependent Operator**

I agree to use the above food facility to store food and equipment and for the preparation of food for the MFF/CMFO or TFF. I understand that if I no longer prepare food at this facility, I must obtain another agreement for the use of a permanent food facility or discontinue food preparation.

- I agree to comply all health code requirements.
- I understand that I must have a separate Dependent Operator permit.

Name of Dependent Operator:

Signature:

Date:

**SUBMISSIONS:**

**For MFF/CMFO:**

**Standard Plan Cart/Previously Permitted Cart/MFF:** Submit the completed application to the Mobile Food Program at [ehvip@ph.lacounty.gov](mailto:ehvip@ph.lacounty.gov) or call (626) 430-5500 for questions.

**New Custom Built Cart:** Submit the completed application to the Plan Check Program at [DPH-PlanCheck\\_Food@ph.lacounty.gov](mailto:DPH-PlanCheck_Food@ph.lacounty.gov) or call (626) 430-5560 for questions.

**For TFF:**

**Community Events associated with a Certified Farmers' Market:** Submit the completed application to the Specialized Food Services Program at [ehsfs@ph.lacounty.gov](mailto:ehsfs@ph.lacounty.gov) or call (626) 430-5421 for questions.

**Community Events NOT associated with a Certified Farmers' Market:** Submit the completed application to the Community Events Program at [communityevents@ph.lacounty.gov](mailto:communityevents@ph.lacounty.gov) or call (626) 430-5320 for questions.

**OFFICE USE ONLY**

This agreement has been approved by:

Date: