

## Commissary Owner Guidance Document

As the owner of a commissary kitchen that may be used by multiple food vendors, you share responsibility for ensuring that all operations in your facility comply with the requirements of the BC Food Premises Regulation. This guidance document will provide you with more information on your responsibilities as the commissary owner.

### Approval of the Commissary

You must apply for approval to operate the commissary to the local Environmental Health Officer. Refer to the [Fraser Health Food Service Establishment Application Package](#) (FSE Application Package) for information on the approval process and submission requirements. The submission requirements must include:

- Application for Health Approval
- 3 sets of floor plans, drawn to scale, showing legend of all equipment, storage areas, and finishing schedule
- Sanitation Plan which should indicate a routine schedule for cleaning the entire facility. The sanitation plan should also include:
  - A list of cleaning and sanitizing agents
  - A list of pesticides
  - A cleaning schedule

### Approval of Renters

Prior to entering into an agreement with a new Renter, you must notify the Environmental Health Officer and submit the documentation outlined in this section for review and approval.

#### 1. Renter Information

Provide general information on the Renter, including:

- Name of the business (provide copy of Certificate of Incorporation if applicable)
- Name of contact person for the business
- Phone number and e-mail address
- Type of food service

Appendix B.1 provides a template that you may use to submit new Renter information.

#### 2. Rental Agreement

The rental agreement should include the following information:

- Start date of the rental agreement
- Dates and times the Renter will be using the Commissary
- List of equipment and services to be provided by the Commissary
- Process for termination of the rental agreement

For mobile food premises, also include the Fraser Health Base of Operation Agreement found in Appendix B.2.

### 3. Floor Plan

The floor plan must identify the designated food preparation areas, equipment, and storage (dry, refrigerated, frozen) for the Renter. While food preparation areas may be used by multiple operators at different times (only one Renter at one time), each Renter must have their own designated storage areas for their sole use.

For mobile food premises using the Commissary as a base of operations also indicate parking area, potable water filling station, and wastewater disposable area.

There must be adequate space for each Renter to store their food and equipment in a safe and sanitary manner, protected from contamination.

All food, equipment, and utensils required for the operation of the business should be stored at the Commissary.

### 4. Food Safety Plan

Refer to the FSE Application Package for information on how to develop a Food Safety Plan.

The Food Safety Plan should clearly indicate the following information:

- List of all menu items being processed/prepared at the Commissary
- List of suppliers
- Where products will be sold/distributed. Clearly indicate if food items will be distributed outside of BC.
- How products will be transported
- Sample of product labels
  - Labels should adhere to [CFIA requirements](#)
  - At minimum, labels should include:
    - Name of product, ingredients
    - Name of Producer/Manufacturer
    - Contact information for manufacturer
    - Address where product was processed (i.e. Commissary address)
- Laboratory results of any quality assurance testing of the products to determine shelf stability and/or microbiological safety. A list of commercial food testing laboratories can be found in Appendix VII of the [BCCDC Guideline for the Sale of Food at Temporary Markets](#).
- For mobile food vendors – indicate source of potable water supply and procedures for waste water disposal.

#### *Thermal Processing*

For higher risk foods intended to be packaged aseptically in an air excluded container (canned), in addition to being prepared in an approved, commercial food premises, the process must be reviewed and accepted by a qualified Processing Authority. See Appendix VI of the [BCCDC Guideline for the Sale of Food at Temporary Food Markets](#) for a list of qualified Processing Authorities in British Columbia.

***Any additions to the list of approved menu items or changes to approved food processes must be submitted to the Environmental Health Officer for review and approval before the changes are implemented.***

## 5. Sanitation Plan

Renters may choose to adopt the Commissary's sanitation plan and use the cleaning and sanitizing agents provided. If so this should be clearly indicated in the Rental Agreement.

If the Renter brings their own equipment and/or chemicals (cleaners, sanitizers, pesticides), a separate Sanitation Plan must be developed for these items.

## 6. Copy of FOODSAFE Level 1 Certificate

All Renters must have a valid FOODSAFE Level 1 certificate or equivalent.

## 7. Application for Health Approval and Permit Fee

Some Renters may require their own Permit to Operate, such as a caterer or a mobile food premises. A separate Application for Health Approval and permit fee must be submitted in addition to the information outlined in this document. If you are unsure if a Renter will require a separate Permit to Operate, contact the Environmental Health Officer.

## Additional Responsibilities and Expectations of Commissary Owner

You share responsibility with the Renters to ensure that all food prepared in the Commissary is in accordance with the Food Premises Regulation.

Maintain a **current list of all Renters using the Commissary** and provide Fraser Health with an updated list any time there is a change (e.g. a Renter starts or leaves; new menu items are added). See Appendix B.3 for a sample template that includes the minimum information required when providing updates.

Maintain **up to date food safety plans** for all Renters, including a current list of menu items being prepared on site. This information must be made readily available to the Environmental Health Officer upon request. Any additions to the list of approved menu items or changes to approved food processes must be submitted to the Environmental Health Officer for review and approval before the changes are implemented.

Maintain a **current floor plan of the facility showing designated food preparation and storage areas** for each Renter. This information must be made readily available to the Environmental Health Officer upon request.

Ensure the facility and equipment provided are maintained in good working order and in sanitary condition. This includes refrigerators, freezers, dishwashers, and hand washing stations.

**Date:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_  
Certificate of Incorporation attached

**Contact Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_

**Type of Contract:**  
Full Time    Part-Time    Ad Hoc    Other: \_\_\_\_\_

Schedule Details:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Copy of Rental Agreement attached

**Type of Food Premises:**  
Processing    Catering    Meal Prep    Mobile Food Vehicle    Other: \_\_\_\_\_

**Where will products be sold:**  
Retail    Farmer's Market    Direct to Customer    Supplying Other Food Premises  
Other: \_\_\_\_\_

Additional Notes:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- The following documentation is enclosed:
- |   |  |
|---|--|
| Application for Health Approval (if applicable) | Sanitation Plan                        |
| Food Safety Plan                                | Valid FOODSAFE Level 1 Certificate     |
| Full List of Menu Items                         | Floor Plan                             |
| Sample Labels                                   | Appropriate permit fee (if applicable) |
| Lab Results                                     |  |

Owner Signature: \_\_\_\_\_

Renter Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

Mobile Food Premises Name: \_\_\_\_\_

Hours and Day(s) of Operation: \_\_\_\_\_

Day(s) and Time(s) at the Base of Operation: \_\_\_\_\_

Address where Mobile Food Unit is Stored: \_\_\_\_\_

**Base of Operation**

Facility Name: \_\_\_\_\_ Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Day(s) and Time(s) of Operation: \_\_\_\_\_

This form is to be completed when the owner of a facility (e.g. food service establishment, warehouse, commercial kitchen) agrees that the premises may be used as a base of operation by a MFP operator. This agreement between the owner of the facility and the MFP operator signifies that both parties agree that the following will be available for use by the MFP operator.

Approved water source (hot & cold)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Approved waste water disposal	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Garbage/trash disposal	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Designated and separate dry storage space	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Designated and separate refrigerator/freezer	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Ice machine available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Food preparation space	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Food equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Mechanical ventilation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Designated hand washing station	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3-compartment sink or commercial dishwasher	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2-compartment sink /food preparation sink	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Mop sink	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Restroom availability	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Mobile food premises storage/parking availability	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Electrical hook-up	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Hose connection for cleaning exterior/interior of MFP	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
After-hours accessibility (entrance key provided)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Sanitary facilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Commercial pest control	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Other (specify): _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Base of operation agreements are not transferable to other parties and will become null and void upon change of legal ownership of either party. Both parties understand that modification or cancellation of this agreement by either party for any reason will result in the suspension of the MFP operating permit or health approval issued by Fraser Health. This suspension is effective until a new agreement is provided and accepted by Fraser Health.

<b>Term of Contract:</b>	From Date: _____	To Date: _____
<b>Base of Operation:</b>	Owner Name (printed): _____	
	Signature: _____	Date: _____
<b>Mobile Food Premises:</b>	Owner Name (printed): _____	
	Signature: _____	Date: _____

