



**Municipality of Anchorage Department of  
Health and Human Services Environmental  
Services Division  
Food Safety & Sanitation Program**

825 "L" Street  
P.O. Box 196650 Anchorage Alaska 99519-6650

<http://www.muni.org/departments/health/environment/fss/Pages/default.aspx>  
Ph. 343-4200 FAX 343-4786



## Commissary Letter

A commissary is a food establishment where support services are provided to one or more caterers, vending machines, mobile food units, limited food services, kiosk, or temporary food services. If a commissary is used to support a facility or function, it is subject to inspection and regulation under the Anchorage Food Code.

Facility Name: \_\_\_\_\_ FA # \_\_\_\_\_

Commissary Name & Address:

\_\_\_\_\_

\_\_\_\_\_

Foods that will be stored and/or prepared at commissary:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates and times of food storage and/or preparation:

*(Expect an inspection during these times)*

\_\_\_\_\_

\_\_\_\_\_

Commissary Owner/Manager

Phone #'s \_\_\_\_\_

Name: \_\_\_\_\_

Signature of Commissary

Owner/Manager:

*I agree to allow food storage and/or preparation at this facility  
by the applicant. Date: \_\_\_\_\_*

\_\_\_\_\_

Temporary Event Vendor

Phone #'s \_\_\_\_\_

Name: \_\_\_\_\_

Signature of Temporary Event Vendor:

*I agree to do all food preparation and storage at this facility or  
on site.*

\_\_\_\_\_