



CART/COMPACT MOBILE FOOD OPERATIONS(CMFO)
PERMIT EXEMPT FORM

THIS SECTION TO BE COMPLETED BY APPLICANT

Business Name: Business Phone:
Site Address: City Zip Code:
Owner's Name: Owner's Phone:
Owner's Address: City Zip Code:
Types of Food Sold:

Initial The undersigned owner/operator of the above-mentioned facility understands that this facility is exempt from obtaining a Health Permit for the retail sale of food and agrees to operate in accordance with said exemption.

Initial The undersigned owner/operator understands that operating outside of this exemption, without a valid health permit, is a misdemeanor and punishable as such according to the California Health and Safety Code, Division 104, Part 7, California Retail Food Code. EXEMPT STATUS BASED ON THE SALE AND STORAGE OF COMMERCIALY PREPACKAGED NONPOTIONALLY HAZARDOUS FOODS IN A COMBINED AREA NOT TO EXCEED 25 SQUARE FEET.

Electronic Signature Only: By checking this box, I confirm I am submitting this application electronically and that the information on this form is true and correct. I also acknowledge that I have read, understand and accept any terms and conditions of this form. Date:

Signature:

Print Name: Title:

THIS SECTION TO BE COMPLETED BY APPROVING SUPERVISOR

Supervisor Name: Date:

Supervisor Signature: Contact Phone Number:

REHS Registration Number: Email Address:

For Office Use Only

SR Number: PE Number:

Received By: Date:

Changes: