



**Island County Public Health**

Environmental Health – Food Safety Program  
 PO Box 5000 Coupeville, WA 98239-5000  
 (360) 678-8276 • Fax: (360) 679-7390  
 E-mail: [foodsafety@islandcountywa.gov](mailto:foodsafety@islandcountywa.gov)

**1. Mobile Food Application**

<b>Application must be completed in full and submitted with the \$103 fee.</b>		
<b>PERMIT/APPLICATION TYPE (Check applicable box)</b>		
TYPE 1 (Limited Handling, No Cook)	TYPE 2 (Same Day Service, No Cooling)	
TYPE 3 (Complex Preparation, Cooling)	Secondary Permit Approval by Reciprocity	
<b>ESTABLISHMENT INFORMATION</b>		
Name:		
Site Address:		
City:	State:	Zip:
Unified Business Identifier (UBI):		
<b>MAILING ADDRESS</b>		
Name:		
Address:		
City:	State:	Zip:
<b>OWNER INFORMATION</b>		
Name:	Phone:	
Address:	E-mail:	
City:	State:	Zip:
<b>CONTACT INFORMATION (if different than owner)</b>		
Name:	Phone:	
Address:	E-mail:	
City:	State:	Zip:
<b>COMMISSARY INFORMATION</b>		
Name:	County/Permit #:	
Address:	E-mail:	
City:	State:	Zip:
<p>I understand I cannot open this food establishment until I have received written approval from Island County Public Health, obtained all annual operating permits/license, and have been inspected/approved by all applicable jurisdictions.</p> <p>Signature of the owner or an officer of the legal ownership affirms the accuracy of the information provided in this application and that the permitted facility will be operated in compliance with the adopted regulations of Island County Food Code (<a href="#">Chapter 8.10D.040</a>).</p>		
Signature:		Date:
Print Name:		