



**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)

**10. Mobile Food Water**

**Mobile Food Unit Name:** \_\_\_\_\_

This form will be required to be submitted for each commissary and/or servicing area used by the mobile food unit.

Location Name:	Location Contact Name:
Site Address:	Parcel Number:
Mailing Address:	Email:

**Water System**

Water system name:			
Water system type:	Group A	Group B	Municipal
	Other:		

**Water System Verification (One of the below must be provided)**

Water bill attached:	
Letter from water system verifying water connection:	
Signature of water purveyor verifying water connection:	
Printed Name	Signature

**Operational Information**

# of Employees per shift:	Estimated Water Use (gal/day):
Seating capacity:	Type of Dishwashing:

OFFICE USE ONLY

<b>Water System Approval</b>
Comments/Requirements: _____ _____ _____ _____ _____
Water Program Specialist Signature & Date



**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)

**10. Mobile Food Wastewater**

**Mobile Food Unit Name:** \_\_\_\_\_

This form will be required to be submitted for each commissary and/or servicing area used by the mobile food unit.

Location Name:	Location Contact Name:
Site Address:	Parcel Number:
Mailing Address:	Email:

**Septic System (Attach all requested documents)**

Septic system as-built:	Septic system Feasibility Study*:
Current septic inspection:	
Existing Use Approval (Describe):	

**Operational Information**

# of Employees per shift:	Estimated Water Use (gal/day):
Seating capacity:	Type of Dishwashing:

OFFICE USE ONLY

<b>On-Site Sewage System Approval</b>
Comments/Requirements: _____ _____ _____ _____ _____
<b>On-Site Sewage Specialist Signature &amp; Date</b>

\* A feasibility study done by a licensed septic designer is required for approval. A feasibility study will look to see if the proposed menu is within the limits of the current septic systems design.

Note: This form will be required to be submitted annually during permit/license renewal.