

## Mobile Food Unit Restroom Authorization

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

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

Mobile Food Unit Owner: \_\_\_\_\_

Mobile Food Unit Description: \_\_\_\_\_

Texas License Plate Number: \_\_\_\_\_

Operation Site Address: \_\_\_\_\_

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

This document certifies that I, \_\_\_\_\_, own or represent, the owner of the property /business located at \_\_\_\_\_ and authorize the employees of the mobile food unit listed above to use the restroom on my property. I certify that the restroom is equipped with a flush-style toilet, a hand wash sink with hot & cold running water under pressure, and soap & approved hand drying provision. The restroom is located within a business that is no more than 300-ft away from the mobile food unit and is available for use by the employees of the mobile food unit during all hours of operation.

The facilities are available during the times of: \_\_\_\_\_ to \_\_\_\_\_

on these days \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
Property / Business Owner / Rep. Name

\_\_\_\_\_  
Property / Establishment Owner / Rep. Signature

Property / Establishment Owner / Rep. Phone Number: \_\_\_\_\_

Subscribed & sworn before me, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public in & for The State of TX Signature

(seal)

**Falsification of this document will result in denial of permit & may result in citations, suspension & or revocation of permit.**