

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
**Department of Health**  
**Health Regulation and Licensing Administration**



**Food Safety & Hygiene**  
**Inspection Services Division**

**FOOD VENDOR'S DEPOT LETTER (Form D)**

I \_\_\_\_\_, state that I will report daily to the  
 \_\_\_\_\_  
 (Print Name of Lead Vendor)

DEPOT / COMMISSARY (identified below) for all necessary food preparation, supplies, basic maintenance and cleaning, and proper disposal of trash and food waste.

I understand that my food vending cart, stand, or vehicle requires inspection and approval by the Department of Health, and is required to have displayed a current food vendor "Health Inspection Certificate" as required by the Food Code Regulations in Title 25 of the District of Columbia Municipal Regulations.

Name of **Depot** Contact: \_\_\_\_\_

Business License #: \_\_\_\_\_ Exp: \_\_\_\_\_ ST: \_\_\_\_\_ Lic Type: \_\_\_\_\_

Depot Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

**Depot** Daily Operating Hours: \_\_\_\_\_ to \_\_\_\_\_

DAYS OF OPERATION: ( ) Sun ( ) Mon ( ) Tues ( ) Wed ( ) Thur ( ) Fri ( ) Sat

Type of Unit/Cart: Tag# _____ State _____ Serial # _____ <input type="checkbox"/> Step van <input type="checkbox"/> Truck <input type="checkbox"/> Tow Unit <input type="checkbox"/> Stand <input type="checkbox"/> Push Cart <input type="checkbox"/> Propane Fuel <input type="checkbox"/> Electrical Generator	Menu/Types of Foods Sold <input type="checkbox"/> Prepackaged only <input type="checkbox"/> Pretzels <input type="checkbox"/> Water Ice <input type="checkbox"/> Produce <input type="checkbox"/> Ice Cream <input type="checkbox"/> Hot foods <input type="checkbox"/> Cold foods <input type="checkbox"/> USDA foods <input type="checkbox"/> Other _____
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**Indicate all Food/Beverage items to be served from this mobile food unit.**  
**The Department reserves the right to limit the menu.)**  
**(Attach additional sheets if necessary)**

FOOD ITEMS	WHERE IS FOOD PREPARED for cooking (vehicle or depot)	WHERE IS FOOD BEING COOKED? (vehicle or depot)	HOT / COLD HOLDING TEMP REQUIREMENT