



**SCHEDULE 2**  
**Commitment Not to Use Deep Fat Frying Equipment**  
**(Mobile and Temporary Food Vending Operations)**

This form is required for installations where it is proposed to use Class 1 cooking appliance where there will be no deep fat frying. The following commitment is given to the City.

Name of Food Vending Business: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Dates of Event: \_\_\_\_\_

Class 1 and 2 Cooking Operations are defined as follows:

“A Class 1 Cooking Operation is defined as any cooking process which produces significant smoke or grease-laden vapours, and includes any equipment which has been designed by the manufacturer to be able to produce significant smoke or grease-laden vapours, except where specifically approved under another Class.”

“A Class 2 Cooking Operation is defined as any cooking equipment or process which produces significant steam or heat and does not produce grease-laden vapours.”

Appliance (type of cooking appliance)	
Intended use of appliance: (attach menu)	
Examples of Class 1 cooking (“grease or smoke”)	Examples of Class 2 cooking (“non-grease”)
<ul style="list-style-type: none"> <li>Pan frying (eg. Eggs, bacon, hamburgers)</li> <li>Deep fat frying, grilling, broiling, stir fry, braising</li> </ul>	<ul style="list-style-type: none"> <li>Boiling water (eg. Potatoes, pasta, rice, poached eggs)</li> <li>Reheating pre-made soups</li> <li>Heating beverages (eg. Hot chocolate)</li> <li>Melting chocolate</li> </ul>

The undersigned, who is the business operator of the cooking operation, acknowledges that the appliance chosen to be used has been designed with the potential for Class 1 cooking which includes deep fat frying. The undersigned commits to limit all use of this appliance to other than deep-fat frying.

In addition to the above, prior to use of the appliance, the operator of the cooking operation commits to ensuring that a sign is securely mounted in a conspicuous location on the mobile vehicle or structure, with the following words sized and coloured so that they can be easily read and understood. The operator commits to maintaining both the sign in place and its readability throughout the operator’s responsibility of the cooking operation.

Sign:

**DEEP FAT FRYING IS NOT ALLOWED.**  
**VENTILATION IS FOR STEAM AND HEAT REMOVAL ONLY.**

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The undersigned acknowledges that the proposed ventilation system has not been designed to comply with the requirements for a Class 1 Cooking Operation that includes deep fat frying and acknowledges that, if deep fat frying is conducted on the appliance, the cooking operation will be considered as an unsafe condition.

Sentence 1.4.2.15.(1) of Division C of the Vancouver Fire By-law states:

“Where in the opinion of the Fire Chief a condition exists which may cause fire or explosion, or may increase the risk of fire, explosion, or danger to persons or property, the Fire Chief may take all reasonable and necessary steps to remove the hazard or risk.”

If the Operator is found by the City to be in breach of this Commitment and if ordered by the Fire Chief, the Operator of the cooking operation commits to cease deep fat frying until a ventilation and fire suppression system is installed to the satisfaction of the Fire Chief.

This **Commitment Not to Use Deep Fat Frying Equipment** is executed by the BUSINESS OPERATOR of the cooking operation this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(Day) (Month) (Year)

1. Where **Operator** is an individual:

Signed, sealed and delivered in the presence of:

Operator's Signature \_\_\_\_\_

Witness's Signature \_\_\_\_\_

Operator's Name \_\_\_\_\_  
(Print)

Witness's Name \_\_\_\_\_  
(Print)

Witness's Address \_\_\_\_\_  
\_\_\_\_\_

2. Where **Operator** is a corporation:

Signed, sealed and delivered in the presence of:

Name of Corporation \_\_\_\_\_

Witness's Signature \_\_\_\_\_

Per:

Authorized Signatory \_\_\_\_\_

Witness's Name \_\_\_\_\_  
(Print)

Name \_\_\_\_\_  
(Print)

Witness's Address \_\_\_\_\_  
\_\_\_\_\_

3. Where **Operator** is a partnership:

Signed, sealed and delivered in the presence of:

Name of Partnership \_\_\_\_\_

Witness's Signature \_\_\_\_\_

Per:

Authorized Signatory \_\_\_\_\_

Witness's Name \_\_\_\_\_  
(Print)

Name \_\_\_\_\_  
(Print)

Witness's Address \_\_\_\_\_  
\_\_\_\_\_