

FOOD TRUCK LICENSE APPLICATION

Applicant _____ Phone # _____

Food Truck Owner/Operator _____

Mailing Address _____

Email _____

Food Truck Description _____
Year/Make/Model Color License Plate# State Issued

Name on Vehicle Registration _____

| | | |
|--------------|--------|----------|
| Permit Type: | Annual | \$100.00 |
| | 30 Day | \$25.00 |

Food Truck Location _____

Please provide the following when submitting your application:

Written consent of property owner where food truck will conduct business

Photo ID

Signature

Date

Printed Name

OFFICE USE ONLY

Approved _____ Denied _____ Date Approved _____

Fee \$ _____ Date Paid _____ License Starts _____ Ends _____

Received by _____ Occ. License # _____

Notes _____