

Where Georgia comes together.

Application for Mobile Food Vendor Contact Community Development (478) 988-2720

Operator/Owner Information *Indicates Required Field						
	Mobile Food Vendo	<mark>r:</mark>				
*Name of Applicant:						
	<mark>Operator</mark>			Vehicle Owner		
*Name						
*Address						
*Phone						
*Email						
Vending Unit Information						
Street Vending Unit Side				ewalk Vending Unit		
*Make and model of vending vehicle:						
*License pl	late number and sta	<mark>ate:</mark>				
Operational Information						
*Proposed Operation Location(s)				*Proposed Dates and Hours of Operation		
					•	
 Submit this completed application, along with the required documentation listed below to the Community Development Office, located on the 2nd floor of Perry City Hall, 1211 Washington Street, Perry, GA 31069: Copy of approved permit from County Health Department in the State of Georgia; Proof of valid liability insurance in the amount of \$1,000,000.00 covering the requested date(s) of operation; Signed statement of private property owner(s) allowing use of their property; Sketch of site(s) showing existing conditions (adjacent streets, buildings, parking lots, landscaped areas, etc.) and location where mobile vendor will set up, including any auxiliary features, i.e. generators, tables/chairs, trash receptacles, signs, etc. 						
elected offi I will comp and I unde submitted and I have	icials from any and ly with the provisior rstand that this per with this application	his permit I agree to indemnify all liability against any and all ns set forth in Section 15-2203 mit may be revoked or suspen n; including any/all supplement sure of the relevant facts.	claims, of the ded for	actions and suits of any perry City Code while open noncompliance. Further	type whatsoever. I agree that erating in the City of Perry, I affirm that all information	
*Applicant					*Date	
For Office U	lse.				Created 6/20/2018	
Date receive		Date deemed complete	Admi	nistrator's decision & date		