



The City of Garfield Heights

Building Department

APPLICATION FOR MOBILE FOOD SERVICE LICENSE

APPLICATION MUST BE TYPED OR LEGIBLY PRINTED IN INK

TYPE OF LICENSE MOBILE FOOD TRUCK FOOD STAND SPECIAL EVENT

NAME IN FULL _____ DATE _____

ADDRESS _____

TELEPHONE # _____ EMAIL ADDRESS _____

DATE OF BIRTH _____ AGE _____ BIRTHPLACE _____

SEX AT BIRTH _____ RACE _____ HEIGHT _____ WEIGHT _____

COLOR OF EYES _____ COLOR OF HAIR _____ SSN _____

DRIVERS LICENSE # _____ ISSUED IN STATE OF _____

NAME OF BUSINESS _____ YRS IN BUSINESS _____

ADDRESS _____

TELEPHONE # _____ EMAIL _____

FEDERAL ID NUMBER _____ SOLE PROPRIETER CORPORATION LLC

INFORMATION REGARDING VEHICLE TO BE USED: (ATTACH SEPARATE SHEETS FOR ADDITIONAL VEHICLES)

MAKE OF VEHICLE _____ MODEL _____ YEAR _____

LICENSE PLATE# _____ COLOR _____

ADDRESS WHERE THE VEHICLE IS PARKED / STORED AT NIGHT? _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A MINOR MISDEMEANOR? _____

WHEN? _____ CHARGE _____

PENALTY _____

I HAVE READ AND AGREE TO OPERATE MY BUSINESS IN COMPLIANCE WITH GHCO CHAPTER 777

SIGNATURE _____ DATE _____

FINDINGS OF POLICE DEPARTMENT _____

REVIEWED BY _____ DATE _____

TWO PHOTOGRAPHS PROVIDED? _____

APPROVED BY: _____ DATE _____
Building Commissioner

LICENSE NUMBER _____ DATE ISSUED _____

- Completed Application
- Chapter 707 Vendors License
- Background Check from Approved Agency
- Copy of Health Department Food Service License
- Certificate of Liability Insurance for each vehicle
- Written permission from each property owner where truck will be used
- Application Fee \$15 for stands \$75 for vehicles No charge special events



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PROPOSED VENDING LOCATIONS

TYPED OR LEGIBLY PRINT IN INK

Location Address: _____ Dates: _____

Property Owner Printed Name: _____ Times: _____

Signature: _____ Telephone: _____

Location Address: _____ Dates: _____

Property Owner Printed Name: _____ Times: _____

Signature: _____ Telephone: _____

Location Address: _____ Dates: _____

Property Owner Printed Name: _____ Times: _____

Signature: _____ Telephone: _____

Location Address: _____ Dates: _____

Property Owner Printed Name: _____ Times: _____

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