



The CITY OF PARIS

**MOBILE FOOD UNIT
APPLICATION**

Permit Number: _____ Total Fees Due: <u> \$50.00 </u>
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CONTACT INFORMATION:

Business Name: _____

Contact Name: _____

Contact Address: _____ Phone: _____

Email Address: _____

REQUIRED SUBMITTALS: Application will not be accepted without all required attachments (see below).

- Copy of compliance certificate from the Lamar County Health Department
- Proposed Location List (see attached)
- Permission letter(s) from the property owner(s) for proposed locations during calendar year
- Copy of State Sales Tax permit
- Copy of State issued Driver's License
- LP/Propane Gas Inspection Report (if applicable)
- Fire Suppression Report (if applicable)

Initial Here

_____ I have read the Mobile Food Units and Food Truck Parks Ordinance, and understand that I am responsible for any code violations and any resulting penalties that may occur as a result of not honoring the City Ordinance.

NOTICE TO APPLICANT:

I have carefully read the complete application and know the same is true and correct. I hereby agree to comply with all provisions of local, State, and Federal Laws, whether herein specified or not. As the owner of the mobile food unit or a duly authorized agent, I hereby grant permission to enter the unit/premises and make all necessary inspections.

Signature: _____ Address: _____

Print Name: _____ Phone Number: _____

Date: _____ Fax #: _____

MOBILE FOOD UNIT PROPOSED SITE(S):

GENERAL REQUIREMENTS: A mobile food unit is allowed as a temporary food service operation that supports a commercial business office or industrial park in approved locations in the City of Paris and in conformance with the Zoning Ordinance.

1. Location/Address: _____ Zoning: _____

2. Location/Address: _____ Zoning: _____

3. Location/Address: _____ Zoning: _____

4. Location/Address: _____ Zoning: _____

5. Location/Address: _____ Zoning: _____

6. Location/Address: _____ Zoning: _____

7. Location/Address: _____ Zoning: _____

8. Location/Address: _____ Zoning: _____

9. Location/Address: _____ Zoning: _____

10. Location/Address: _____ Zoning: _____