

# Street Food Vendor Permit Application Form

**Vendor / Business Name:**

**Owner / Applicant Name:**

**Contact Number:**

**Email Address:**

**Residential/Business Address:**

## Food Operation Details

**Type(s) of Food/Beverages Sold:**

**Operational Area/Locations:**

**Hours of Operation:**

**Type of Cart/Vehicle/Stand:**

## Health & Safety Compliance

**Food Safety Certification Number:**

**Do you have a valid health inspection certificate?**

**Liability Insurance Policy Number:**

**Additional Notes:**

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I hereby certify that all information provided is true and agree to comply with all local street food vending regulations.

Submit Application