



Administrative Services Department  
3468 North Fulton Avenue  
Hapeville, Georgia 30354  
Phone: (404) 669-2100  
Fax: (404) 669-3302

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## Mobile Food Vendor Application City Sponsored or 501(C) Non-Profit Event

Please check which permit you are applying for:                      Ninety Day Permit                      Three Day Permit

**Mobile Food Vendor** Shall mean a retail food establishment that reports to and operates from a Commissary and is readily moveable, is a motorized wheeled vehicle or a towed wheeled vehicle designed and equipped to serve food.

***It shall be unlawful for any person to sell, or offer for sale, food of any type from a Mobile Food Vendor without a license first having been granted under this section, except for such activities conducted in connection with City-Sponsored events.***

Date: \_\_\_\_\_

Name of the Mobile Food Vendor: \_\_\_\_\_

Make, Model and License Plate # of Vending Unit: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Is permit for a City Sponsored or 501 (C) Non-Profit event?    Yes                      No

If yes, please provide the name of the event: \_\_\_\_\_

Date(s) of event: \_\_\_\_\_

### REQUIRED DOCUMENTS:

- 1) Copy of approved food service permit from the Fulton County Health Department (if applicable).
- 2) Proof of current liability insurance policy in the amount of \$1,000,000.00 protecting the Mobile Food

Vendor, the public and the City from all claims for damage to property and bodily injury, including death, which may arise from operation under or in connection with the permit. If the Mobile Food Vendor does not have insurance, the Transient Merchant may be under the umbrella of an existing business with the business' permission to do so. Such arrangement documentation shall be attached to application

- 3) An executed Release of Indemnification Agreement.
- 4) If 501(c) Non-Profit event, please attach proof to application.
- 5) City-sponsored events are determined by the City Manager.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

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The event is a confirmed 501(c) non-profit event?  YES  NO  N/A  
*(application fee is waived for 501(c) non-profit events)*

The event is a city-sponsored event as determined by the City Manager?  YES  NO  N/A  
*(application fee is waived for city-sponsored events)*

Approval to park on City owned property?  YES  NO  N/A

APPROVED  NOT APPROVED

Comments:

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\_\_\_\_\_  
City Manager

\_\_\_\_\_  
Date