

**DEPARTMENT OF ENVIRONMENTAL RESOURCES**

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www.stancounty.com

MOBILE FOOD FACILITIES APPLICATION FOR PERMIT

Please make sure the writing is as clear as possible. (An illegible application will result in a delay or denial of a permit.)
Shaded areas are for DER office use only.

MOBILE FOOD FACILITY INFORMATION

Business Name

Vehicle Make

Model

Year

License #

VIN

Type of Vehicle ☐ Self-propelled Vehicle ☐ Trailer ☐ Push or Pedal Cart ☐ Other:Planned Operation ☐ Stationary ☐ Enroute ☐ Community Event Only

If the equipment is a motorized vehicle or trailer, please provide the registered owner's name as it appears on the DMV registration. If the equipment is a cart that is not registered with the DMV, provide the name of the cart's owner.

Owner's Name

Owner's Address

City

State

Zip

Phone

Email:

Operator's/Leasee's Name

Same as Owner's Information

☐ Yes☐ No

Operator's/Leasee's Address

City

State

Zip

Phone

Email:

PROPOSED MENU (The menu is subject to the approval of this Department.)☐ Prepackaged ☐ Same as last year☐ Prepackaged ☐ Same as last year☐ Prepackaged ☐ Same as last year☐ Prepackaged ☐ Same as last year☐ Prepackaged ☐ Same as last year☐ Prepackaged ☐ Same as last year

I, the above-mentioned permit applicant, have answered the questions to the best of my knowledge. If any of the above information has changed, I will notify the Stanislaus County Department of Environmental Resources to make the necessary changes immediately.

Permit Applicant's Signature:

Date:

DER USE ONLY (Permit to operate is subject to approval from other applicable agencies.)

Received on:

Mobile Food Vendor Category: ☐ 1 ☐ 2 ☐ 3 ☐ 4

Comment:

Approved by:

Date: