

City of Dunn Planning Department

102 N. Powell Ave. P.O. Box 1065

Dunn, NC 28335 Main: (910) 230-3505 Fax: (910) 230-9005

www.cityofdunn.org

Food Truck Application Submittal Checklist

This checklist indicates the minimum items required for this permit application to be considered complete. Please **initial** each item in the following checklist. **Write** N/A for items that are not applicable.

Applicant Initials	Required component of complete application				
	(1) Application logged in (Station outside of the Planning & Inspection Department)				
	(2) Food Truck Application is filled out completely.				
	(3) If using a private parcel, a letter of consent from property owner with signature, contact information and date is included.				
	(4) A photo of tow vehicle and trailer is included with length of tow vehicle and trailed separately and combined. The photo should include placement of 30 gallon trash receptacle.				
	(5) Make and model of generator is included, as well as decibel level.				
	(6) Cooking equipment and fire extinguishers are listed. Attach additional sheet if necessary.				
	(7) Type of food is indicated and a menu is attached.				
	(8) Days, hours, and locations of operation are listed. This can be added to as needed.				
	(9) Vehicle trailer registration, valid certificate of insurance, proof of liability insurance and approved application signed by a County Environmental Health Specialist are included.				
	(10) *If on private property - Site plan, drawn to scale, is included showing lot lines, ingress and egress, traffic circulation, location of food truck(s) on property that are within setbacks. *If in public ROW, indicate street block that you will park on (using no more than 2 parking spaces).				
	(11) I have read all of the information provided and understand that I must receive an inspection and a Food Truck Permit card before I can operate in the City of Dunn.				

I understand that no application will be held that is considered incomplete. If found to be incomplete it will be returned to me to make the corrections before it will be reviewed or considered. All information contained in this Food Truck Application is complete and accurate to the best of my knowledge and ability.

Applicant Signature:	Date:
Print Name:	

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FOOD TRUCK

#				

Date Paid:
Amount:
Payment Type:
Employee Initials:

Food Truck Permit Application

<u>Definition</u>: A food truck means a licensed, readily moveable cart, trailer, or motorized wheeled vehicle, designed and equipped to serve food to the general public.

Date:					
APPLICANT INFORMATION	<u>1</u>				
Food Operator Name:	ood Operator Name: Phone Number:				
Food Operator Email:					
Mailing Address:					
	(Street)	(City, State, Zip Code)			
Emergency Contact Na	ame:	Phone Number:			
FOOD TRUCK INFORMATION	<u>ON</u>				
Truck Name:					
Size of food truck: If a tow vehicle is used & will remain attached, include length of tow vehicle and trailer combined. Attach photo.					
Will you be using a gen	nerator?iNoYes	Make/Model:			
What is the decibel lev	/el?				
List cooking equipment. Attach additional sheet is necessary.					
List fire extinguishers.					
Type of food (attach m	enu):				
	Days, hour	s, and locations of operation			
Date(s)	Time(s)	Location(s)			

REQUIRED ATTACHMENTS

- Vehicle trailer registration
- Certificate of Insurance
- Proof of Liability Insurance
- Approved application signed by a County Environmental Health Specialist

	te parcel, please attac tact information, and		the property owner with
Address of ope	erations or PIN:		
	(Str	eet)	(City, State, Zip Code)
Property Owne	er's Name:		Phone Number:
property that are	<mark>perty</mark> - site plan must show within the setbacks. Must b	e drawn to scale.	ress, traffic circulation, location of food truck(s) on ill use no more than 2 parking spaces.
I affirm that th knowledge.	e statements made in	the foregoing application	n are true and complete to the best of my
Signature:		Printed Name	e:
		For office use o	nly
Zoning and Fire	e Inspection		
Zoning:	Approved	Denied	
Fire Inspection	n: Approved	Denied	
Comments:			
Zoning Official	:		Date:
Printed Name:			
Fire Inspector:			Date:
Printed Name			

Owner Consent Letter

Food Truck Applicant I	Name:				
Address:City:	NC, Zip				
Date:					
I, (Property Owner Nar	me)		give perm	ission for <i>(F</i> e	ood Truck Name)
	to park fo	ood truck at <i>(proper</i> (PINI)	ty address) -		
(period of time)		 			
Thank you,					
Owner Signature					
Printed Owner Name					
Owner Address					
Owner Telephone Nun	nber				