

Approved By: _

Phone: 817-489-2201

Website: www.newarktexas.com

Address: 209 Hudson St.

PO Box 156 Newark, TX 76071

Food Truck Permit Application

Building Permit Number:

Permit Issued on: _____

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Type of Unit: ☐ Truck ☐ Van ☐ Trailer ☐			
Company Name:	License	Plate No./ State	
/ehicle Name:			
Description of Vehicle: Make:	Model:	Year:	
ize: Color:			
Name of applicant who will be responsible	for the activities of al	l vendors under this permi	it:
Name:	_D.O.B	_ D.L.#/State:	
Street Address:			
Contact Number:	Email Address:	·	
Establishment Information			
f of Certified Food Service Handlers:	# of Certified	Food Service Managers:	
Certified Food Service Manager Name:			
s a grease trap present: If yes, capacity:			
Products to Be Sold:			
hereby certify that I have read and examined this ap ordinances governing sales within the city limits will presume to give authority to viola	be complied with wheth	er specified or not. The granting	of a permit does no
Signature of Applicant:		Date:	
************		*******	******
	Office Use Only		
Total Fees: Payment Date:	Payment Type:	Receipt #	By:
Date Sent to PR: Receiv	ed from PR:	BV Project #:	

Food Truck Vendor Checklist

Proof of Liability Insurance
Location of Parking: If using Private Property, food truck property affidavit from property owner
from which the mobile unit will be parked
☐ Site plan (location of food truck, source of power, etc.)
List of Foods/Beverages to be served
Proof of current Health Inspection
Current Food Handler or Food Manager card for each food-service employee
☐ Menu of all food/beverages to be served
☐ Dimensions and set up of interior of Food truck/trailer
Photos of Mobile Food truck interior and exterior
☐ Mobile food unit permit fee