

Food Truck Application

Event Applying For: _____

Name: _____

Food Truck Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Business License Number/Tax ID#: _____

Description of food offered:

Truck/Cart Dimensions: Height _____ x Width _____ x
Length _____

Electric Requirements: _____

Food Truck Fee: \$200

Please return completed application and fee to:
Ky Arts Fest
PO Box 23797
Lexington, Ky

