

CITY OF CLINTON

MOBILE FOOD TRUCK PERMIT APPLICATION

100 N. Bowling Street • Clinton, TN 37716 • (865) 457-0424



NOTE: This application must be filled out completely. Application for a permit does not guarantee that a permit will be granted. Application approval is based upon compliance of the Mobile Food Truck with state and local health requirements and City of Clinton ordinances governing Mobile Food Truck operations.

1. APPLICANT INFORMATION

Mobile Food Truck Name: _____

Mobile Food Truck Address (Base of Operation): _____

Mobile Food Truck Phone No.: _____

Base of Operation County: _____ County Business License No.: _____

City of Clinton Business License No. (if applicable): _____

TN Dept of Health License No.: _____

Mobile Food Truck Owner(s) Full Name: _____

Mobile Food Truck Owner(s) Phone No.: _____

Mobile Food Truck Owner(s) E-mail: _____

Mobile Food Truck Vehicle Make: _____

Mobile Food Truck Vehicle Model/Year: _____

Mobile Food Truck Vehicle License Plate State/No.: _____

2. STATEMENT

I certify that all information in this application and the required documents is accurate to the best of my knowledge. I agree to comply with the City of Clinton regulations regarding Mobile Food Trucks. I understand that in order to locate the Mobile Food Truck on public property requires prior written approval by the City of Clinton and applicable insurance documents.

Signature of Applicant

Printed Name of Applicant

MOBILE FOOD TRUCK PERMIT REQUIRED DOCUMENTS CHECKLIST

| Required Item | Applicant | City |
|--|--------------------------|--------------------------|
| Completed and Signed Application | <input type="checkbox"/> | <input type="checkbox"/> |
| Copy of County Business License (Domicile County) | <input type="checkbox"/> | <input type="checkbox"/> |
| Copy of City of Clinton Business License (if applicable) | <input type="checkbox"/> | <input type="checkbox"/> |
| Copy of TN Department of Health License | <input type="checkbox"/> | <input type="checkbox"/> |
| Copy of Vehicle Registration | <input type="checkbox"/> | <input type="checkbox"/> |
| Copy of Automobile Liability Insurance | <input type="checkbox"/> | <input type="checkbox"/> |
| Permit Fee Payable to the City of Clinton | <input type="checkbox"/> | <input type="checkbox"/> |

For location on public property the following additional documents are required in addition to prior approval by the Clinton City Manager.

| Required Item | Applicant | City |
|--|--------------------------|--------------------------|
| Copy of Liability Insurance (not less than \$1,000,000) with City of Clinton as additionally insured | <input type="checkbox"/> | <input type="checkbox"/> |
| Completed and Signed Indemnity Agreement | <input type="checkbox"/> | <input type="checkbox"/> |
| Completed and Signed City Manager Approval Form | <input type="checkbox"/> | <input type="checkbox"/> |