APPLICATION FOR MOBILE FOOD VENDING LICENSE

City Clerk's Office 300 West Waugh Street #317 Post Office Box 1205 Dalton, Georgia 30722-1205 Phone(706) 529-2490 Fax (706) 529-2491



For office use only
Customer Number:
License Number:

• Section I – Please select the type	e of function for the m	nobile food vending	g vehicle.	
City sponsored events		Non-city sponsored food truck area		
Private for profit		Private not for profit		
Section II - Please complete the	following accordingly.			
MFV owner (Corporation or Sole Proprieto	rship):			
D/B/A (Name of Business, if left blank the r	name above will be used):		
Owner's mailing address:		Owner's telephone number:		
City / State / Zip:		Owner's e-mail address:		
MFV Operator: (must be an individual)		Operator phone number:		
MFV applicant's name:		Location planning to operate in:		
Applicant's driver license number (list state Please attach to this application, copies of		drivers of the MFV u	unit.	
Vehicle make:	Model:		VIN:	
Vehicle license plate number: List state if not GA				
Occupational tax number or Business Licen	nse Number:			
Department of Health License/Permit Num	nber:			
Section III – Please provide the f	following information	as required.		
Georgia Sales Tax Number: This application must be filled out comp	Geo Dietely. Application appro ments and City of Dalton fice along with the Mobi	orgia Tax ID Number oval is based upon co ordinance governin	ompliance of the Mobile Food Vendor (MFV) g mobile food vending licenses. This form	
	ons regarding the mobile	e food vendor license	ate to the best of my knowledge. I agree to e. I understand that if any changes are made	
Printed name of applicant	Signature of applicant		Date	

MOBILE FOOD PARKING PERMIT



GEORGIA MOBILE FOOD SERVICE UNIT LOCATION LISTING

• This page is for existing mobile food vendors who wish to hold a short-term parking permit in order to operate in designated location(s)/space(s) within the City of Dalton.

MFV owner: _____D/B/A: _____

MFV operator:	MFV app	olicant:	
Location	Space #	Date and Time	Select applicable day(s) of the week
			M T W Th F Sa Su
			M T W Th F Sa Su
			M T W Th F Sa Su
			M T W Th F Sa Su
			M T W Th F Sa Su
vehicle within the City of Dal	ton corporate limits inform the Clerk's (s. Office on any changes	25 per day or \$100 annual fee for the mobile food to the dates, times, or locations for their MFV parking ton Code.
I attest that the mobile unit listed abo	ove will operate at t	he above listed locatio	ons as submitted to the Clerk's Office thisday of
Name:	1	Title:	
Signature:			
Amount Paid:		Receipt#	