

# Suwannee County Fire Rescue Fire Prevention Division

13530 80<sup>th</sup> Terrace Live Oak, FL 32060 Phone: 386-364-3404

### **MOBILE FOOD VENDOR PERMIT APPLICATION**

OWNERS INFORMATION					
Name:					
Business Name:					
Address:					
City:	State:		Zip:		
Phone:	E-mail:				
ON-SITE OPERATOR'S INFORMATION (If different than Owner)					
Name: Mobile Phone:					
Address:					
City:	State: Zip:				
TENT INFORMATION					
Type of Tent: <ul> <li>Open Canopy</li> <li>Canopy with sidewalls</li> <li>Ca</li></ul>					
Placement of Tent:   Pavement  Gravel  Grass  Tent Size:					
Vendor/Rental Company if applicable.					
Name:	City:		State		
Ph#					
TRUCK-TRAILER INFORMATION					
Food Truck Name:		License Plate:			
Year:	Make:		Model:		
TYPE OF COOKING					
Type of Cooking: (Check all that apply)					
Deep Frying     Warming Pre-Cooked Meats     Cooking Raw Meats     Smoking					
□ Cooking Vegetables in oil or butter □ Pizza Baking □ Stir Frying □ Pressure Cooking □ Boiling					
COOKING EQUIPMENT					
Type of Cooking Equipment: (Check all that apply)					
Griddle Grill Oven Range Deep Fryer Broiler					
Pizza Oven     Steaming Equipment     Skillet     Pressure Cooker					
Cooking Fuel: (Check all that apply)   Electric  Propane  Solid Fuel					
How many lbs. of Propane on site:					
OTHER EQUIPMENT					
Check all that apply:  Generator  Fire Suppression System					
Type 1 Kitchen Hood (Smoke and grease-laden vapors)					
□ Type 2 Kitchen Hood (Other purposes such as steaming, boiling, or dishwashing)					



## Suwannee County Fire Rescue

Fire Prevention Division

13530 80<sup>th</sup> Terrace Live Oak, FL 32060 Phone: 386-364-3404

### MOBILE FOOD VENDOR PERMIT APPLICATION

I hereby certify that I have read this application and that all information contained herein is true and correct to the best of my knowledge. I agree to comply with all state statutes, County ordinances, federal, state, and local regulations which govern special events and tent usage. I certify that I am authorized by the organization named herein to act as it's agent for the herein-described activity. I and the organization on whose behalf I make this application, hereby represent, stipulate, contract, and agree that we jointly and severally indemnify and hold Suwannee County harmless against all liability, including court costs and attorney fees, for any and all claims for damage to property, or injury to or death of persons arising out of or resulting from issuance of the permit or the conduct or the activity of which it was issued for and the actions or failure to act on the part of the applicant's representatives, employees, agents, servants, invitees, or any persons connected to the applicant.

SIGNATORE				
Signature:				
Name (printed or typed):				
Title (printed or typed):				
FIRE OFFICIAL USE ONLY BELOW THIS LINE				
Fire Department:	Approved	Disapproved		
Fire Official's Representative:		Date		
Reviewer's comments/required equipment.				

#### **INSTRUCTIONS:**

- 1. Incomplete applications will be returned unprocessed.
- 2. Applications are to be submitted 10 days before the event.
- 3. The application shall include detailed drawings of the display layout.
- 4. Application shall include proof of Liability Insurance (also known as Declaration).
- 5. Application shall include a Tent Flame Certification that meets NFPA 701 requirements, if applicable.
- 4. Application shall be submitted for a permit with the payment of \$65.00.
- 5. Checks or money orders are payable to **Suwannee County Fire Rescue**.
- 6. Application and payment shall be mailed to 13530 80<sup>th</sup> Terrace, Live Oak, FL 32060.

Documentation and requests for additional information can be e-mailed to prevention@suwcountyfl.gov