

## **Village of Murray**

<b>Date of Application</b>	n:
Begin Date:	
Expiration Date: _	
Permit Fee:	\$25.00 Per Day

## MOBILE FOOD TRUCKS AND TRAILERS (ENCLOSED) PERMIT APPLICATION

\*Per Ordinance 111.01

Primary Vendor Operator Name:	tor Name:Personal Cell #:			
Business/Corporate Name:				
		City/State: Phone:		
Federal Tax ID #:	Em	nail:		
Names of all Officers in Corp/Partners	hip:			
Truck/Vehicle Make, Model, Year, Lice	ense #:			
General Description of Type of Food b	eing sold:			
Authorized Driver:	Driver's Lic #:			
Authorized Driver:	Driver's Lic #:			
Address of Planned Parking Site:				
Name of Property Owner of Planned P	arking Site:			
Phone Number of Property Owner:				
Dates/Hours of Operation:	@	am/pm to	@	am/pm
Dates/Hours of Operation:	@	am/pm to	@	am/pm
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## DOCUMENTS that must be attached to this application:

- o Completed Application Form
- Signed Waiver of Liability
- Proof of Insurance as set forth in Supplement No. 1 listing Village of Murray as an additional insured and entitled to notice of cancellation (copy)
- Proof of Vehicle Liability Insurance (copy)
- Proof of Vehicle Registration (copy)
- Nebraska Sales Tax Permit Certificate (copy)

- o Proof of State of Nebraska Food Establishment Inspection (copy)
- Written permission from private property owner and the adjoining property owners or the Village Board of Trustees for public property
- o Written plan for disposal of grease, water, and other waste

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*Permit valid ONLY for the sales location and sales period specified in the	nis application. Permits do not extend
to a later sales period. A separate permit is required for each location ar	nd each individual vending unit, even if
owned by the same owner/operator.	
I hereby acknowledge receipt of both Supplement No. 1 of the Mobile	Food Trucks and Trailers (Enclosed)
Standards and Ordinance No outlining the application, approve	al or denial, and revocation of a Mobile
Food Trucks and Trailers (Enclosed) Permit. By my signature below, I	agree to the terms and conditions set
forth in the Ordinance and Supplement No. 1, and I attest that the ab	pove-provided information is true and
accurate to the best of my knowledge and that all required attachments a	re included.
Applicant – Printed Name	Date
Applicant - Signature	Date
Clerk/Treasurer Signature	Date
Mobile Food Trucks and Trailers (Enclosed) Permit Fee: \$25.00 per day	X days = \$
F	Paid [ ] Cash
	[ ] Check #
	[ ] Credit Card
	Receipt #