MOBILE FOOD SERVICE UNIT PROPERTY USE AGREEMENT

The property owner agrees to allow the Mobile Food Service Unit listed below to use his/her property (indicated below) as a Food Vending Location during the times specified below.

PROPERTY OWNER INFORMATION:

Owner Name: _____ Phone (_____)_____

Street Address of Owner: _____

City: _____ Zip Code: _____

E-Mail Address: _____ Signature: _____

Date: _____

MOBILE FOOD SERVICE UNIT INFORMATION:

Name of Mobile Food Service Unit: _____ Permit #: _____

Name of Mobile Food Service Unit Owner:_____ Phone (_____)_____

Times of Operation: _____

Base of Operation Address: _____ Phone (_____)_____

City: _____ Zip Code: _____

Property/Food Vending Location Address: _____

City: _____ Zip Code: _____

E-Mail Address: _____ Signature: _____

Date: _____

NOTE: As a Mobile Food Service Unit permit holder, I understand and agree that if I make any changes to my Food Vending Location, I must notify the Environmental Health Department (EH) within seven (7) calendar days. I further understand that failure to notify EH of any changes may result in the suspension or revocation of my permit to operate as a Mobile Food Service Unit.