



CITY OF ANNISTON
MOBILE FOOD UNIT APPLICATION



Applicant Name: _____
Food Truck/Business Name: _____
Address: _____
Phone: _____ Email: _____
Site Locations: _____

Type of Mobile Food Unit: (Circle option or explain) Trailer/Truck/Tent/ _____

Must submit ALL documentation BEFORE application is processed.

Choose ALL applicable:

1. () US State Driver's License; () US State Identification Card; () US Passport with US Visa Certification; () Foreign Passport with US Visa Certification.
 2. () Description of Mobile Unit
 3. () Health Department Permit from Calhoun County; May require fire inspection first.
 4. () **Application Fee** (Non-Refundable) of **\$100.00**, plus annual sales tax fee after first year of operation in City,
- OR**
- () **Food Truck Event Fee** of **\$25** for each event.
 5. () Letter from property owner – to be inspected at site.

Signature of Applicant: _____ Date: _____

**FIRE INSPECTION ON UNIT MUST BE COMPLETED PRIOR TO PERMIT TO
BEING ISSUED**
FOR INTERNAL USE ONLY

() APPROVAL OF PERMIT

() DENIAL OF PERMIT

If denied, reason for denial: _____

Building Inspections/Deputy Fire Marshal or Designee

Date