



## 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: \_\_\_\_\_

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### 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.