

230 N. Bluff Street
PO Box 544 Lake City, CO 81235
970-944-2333
www.townoflakecityco.gov
townmanager@townoflakecity.co

TOWN OF LAKE CITY

Date of Application:

Applicant Information

Applicant Name/Contact: _____

Legal Entity to Hold Permit: _____

Mailing Address: _____

Email Address: _____

Phone Number: _____

Proposed Food Truck Location:

If not in a town owned lot please provide a map or sketch of the area to be occupied

Business Proposal/Business Plan:

Applications need to be submitted with a business proposal/business plan that includes what kind of food you will be serving, where you plan to be operating, operating months, days, and hours including estimated first and last day of operation for the year, total number of days you plan to operate (must be a minimum of 100 days), and estimated length of time to secure a food truck and receive the necessary licenses from the Silver Thread Public Health department.

REQUIRED DOCUMENTATION BEFORE OPERATIONS MAY BEGIN:

Please provide copies of the items listed below. Vendors are responsible for obtaining and complying with the terms of all associated licenses and permits.

- Sales Tax License
- Retail Food License – from Silver Thread Public Health District, 970-252-5000
- Copy of the Mobile Unit Plan Review Form – from Silver Thread Public Health District
- Proof of Vehicle Insurance
- Proof of General Liability Insurance
- Photo ID of Applicant

MOBILE FOOD VENDOR RULES AND REGULATIONS

1. It shall be unlawful for any person or entity to sell or offer any food item for sale from a motor vehicle, trailer, utility trailer, trailer coach, or similar vehicle without first obtaining a Mobile Food Vendor Permit (hereinafter "MFVP") pursuant to these Mobile Food Vendor Regulations.
2. Any applicant for a MFVP must provide the Town of Lake City with written notice from the Colorado Department of Health and Environment or the Hinsdale County Silver Thread Public Health Department of the applicant's compliance with any and all health standards, regulations, and requirements for operating such mobile food vehicle.
3. The Town shall allow a maximum of two (2) MFVP within the Town limits at any time.
4. MVFP applicants will be selected via a lottery once a complete application is submitted including proof of compliance with all health standard requirements.
5. Mobile Food Vendor shall be operating a minimum of 100 days or the permit will be revoked.
6. MVFP shall be \$250 per year and shall renew annually on January 1.
7. MVFP may only be operated on at the following locations:
 - a. Memorial Park (Dependent on location must have county permit as well)
 - b. Pumphouse Park
 - c. Ski Hill (Must have County Permit as well)
 - d. Private Property only in the "CBD" Central Business District described in Section 23-14 of the Town Code, the "GBD" General Business District Section 23-15 of the Town Code and the Tourist District Section 23-13 of the Town Code and with property owner's consent and a conditional use permit.
8. MFVP locations owned by the Town. In order to operate a MFVP on property owned by the Town, the MFVP Vendor must enter into a non-exclusive lease of the location with the Town at a cost of two hundred and fifty dollars (\$250) per month or one thousand and five hundred dollars (\$1500) for 6 months.
9. In the event a MVFP fails to open or operate their motor vehicle, trailer, utility trailer, trailer coach, or similar vehicle (hereinafter "Vehicle") for a period of time exceeding 14 days such MFVP holder must remove their Vehicle from the MFVP location. In no event shall storage of a MFVP Vehicle be permitted without reasonable operation of such Vehicle.
10. Mobile Food Vendor must sign a waiver of liability from the Town in case of accidents.

I understand the rules and regulations as outlined above and agree to comply with all conditions stated above. I agree to the estimated fees, and I confirm that all statements on this application are true and accurate to the best of my knowledge.

Signature of Applicant

Date

Section Below for City Use Only

	Date
Application & Supporting Documents Received	
Location Approved	
Fees Collected	
Permit Issued	
Staff comments:	

Approved: _____

Signature

Date