



TOWN OF BENSON
 Planning and Zoning Department
 303 E. Church St.
 Benson, NC 27504
 919-894-3553

**FOOD TRUCK PERMIT APPLICATION
 SUBMITTAL CHECKLIST**

This checklist indicates the minimum items required for this permit application to be considered complete. Please initial each item in the following checklist. Write N/A for items that are not applicable.

Provided		
Applicant Initials	Staff Initials	
		Food Truck Application is filled out completely.
		A letter of consent from property owner notarized signature , contact information and date
		Photo of tow vehicle and trailer is included with length of tow vehicle and trailed separately and combined. Photo should include placement of 30 gallon trash receptacle.
		Make and model of generator and decibel level
		Cooking equipment and fire extinguishers area listed. Attach additional sheet if necessary.
		Type of food is indicated and ma menu is attached.
		Days, hours, and locations of operation are listed.
		Vehicle trailer registration, valid certificate of insurance, proof of liability and approved application signed by a County Environmental Health Specialist are included.
		If on private property – site plan, drawn to scale showing lot lines, ingress and egress, traffic circulation, location of food truck(s) that are within setbacks. *If in public right of way, indicate street block to be parked on (using no more than two (2) parking spaces).
		I have read all of the information provided and understand that I must receive an inspection and a Food Truck Permit before I can operate in the Town of Benson.

I understand that no application will be held that is considered incomplete. If found to be incomplete it will be returned to make corrections before it will be reviewed or considered. All information contained in this Food Truck Application is complete and accurate to the best of my knowledge and ability.

Applicant Signature: _____

Date: _____

Print Name: _____



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THE FILING FEE SHALL BE IN ACCORDANCE WITH THE SCHEDULE OF FEES

APPLICANT INFORMATION

Food Operator Name: _____
Mailing Address: _____
Phone Number: _____
Contact Person: _____
Email Address: _____

FOOD TRUCK INFORMATION

Truck Name: _____
Size of Truck: _____
 If a tow truck is used and will remain attached, include length of tow vehicle and trailer combined. Attach photo.
Generator? No Yes **Make/Model:** _____ **Decibel Level?** _____
List of cooking equipment. Attach additional sheet if necessary. _____
List fire extinguishers. _____
Type of food (attach menu): _____

Days, hours and locations of operation		
Date(s)	Time(s)	Location(s)

Required Attachments:

- Vehicle trailer registration
- Certificate of Insurance
- Proof of Liability Insurance
- Approved application signed by a County Environmental Health Specialist

If using a private parcel, please attach letter of consent from the property owner with signature, contact information and date.

Address of operations or Tax Parcel ID: _____
Street City, State, Zip Code

Property Owner's Name: _____ Phone Number: _____

Site Plan must be attached.

If on private property – site plan must show property, ingress and egress, traffic circulation, location of food truck(s) on property that are within the setbacks. Must be drawn to scale. If in public right-of-way, indicate street block that it will be parked on and will use no more than two parking spaces.

APPLICANT AFFIDAVIT

I hereby certify that all information presented by me in this application is accurate to the best of my knowledge, information, and belief. I hereby grant the Town of Benson and any interested government agencies access to my property during reasonable hours.

OWNER(S) SIGNATURE

DATE

APPLIANT(S) SIGNATURE

DATE

OFFICE USE ONLY	
Zoning and Fire Inspection	
Zoning: Approved _____	Denied _____
Fire Inspection: Approved _____	Denied _____
Comments: _____	

Zoning Official: _____	Date: _____
Printed Name: _____	
Fire Inspector: _____	Date: _____
Printed Name: _____	

OWNER CONSENT LETTER

Food Truck Applicant Name: _____

Address: _____

City: _____ NC, Zip _____

Date: _____

I, (Property Owner Name) _____ give permission for (Food Truck Name)

_____ to park food truck at (property address) _____

_____ (Parcel ID) _____ for (period of time)
