



Town of Shelburne, Vermont

CHARTERED 1763

P.O. BOX 88 5420 SHELBURNE ROAD SHELBURNE, VT 05482

Clerk/Treasurer
(802) 985-5116

Town Manager
(802) 985-5111

Zoning & Planning
(802) 985-5118

Assessor
(802) 985-5115

Recreation
(802) 985-5110

FAX Number
(802) 985-9550

FOOD TRUCK LICENSE APPLICATION

*Also available in alternate formats in accordance with the Americans with Disability Act.

A Food Truck License will be required prior conducting Food Truck activities as defined by the Shelburne Food Truck Ordinance, adopted by the Selectboard May 10, 2016 pursuant to the authority conferred by 24 V.S.A. §2291(9) and Section 1.6 of the Town Charter. A copy of the ordinance has been attached for your convenience.

Applicant/Owner
Name (please print):
Mailing Address:
City: State: Zip:
Business Address:
City: State: Zip:
Email Address:
Phone:

Employee(s)
Name:
Address: City: State Zip
Phone:
Name:
Address: City: State Zip
Phone:
Name:
Address: City: State Zip
Phone:

**If employed or sponsored for Food Truck Activities please provide the following information:*

Employer Information
Name of Employer/Sponsor:
Employer Address:
City: State: Zip:
Phone:
Describe or attach credentials establishing the exact relationship:

Application Checklist (check all that apply)	
1. If the Food Truck is to be operated on private property, a letter is needed from the property owner consenting to the activity. If the Food Truck is to be operated on any public property other than a public right-of-way, a letter is needed from the Shelburne Town Manager authorizing the peddling activity.	
2. Identification of any liability insurance policies, with a statement of policy limits, available to cover any injury or damage resulting from the applicant's activities in the Town of Shelburne.	
3. Copy of restaurant license from State of Vermont.	
4. Copy of Vermont Health Department inspection.	
5. Property owner authorization letter if the Food Truck is to be operated on private property, a letter is needed from the property owner consenting to the activity.	
6. Letter from Shelburne Town Manager authorizing activities if the Food Truck is to be operated on any public property other than a public right-of-way.	

Applicant/Owner Signature: I _____ hereby certify all of the information contained herein is true and accurate to the best of knowledge. I hereby agree to abide by the provisions of the Shelburne Food Truck Ordinance and understand the license may be revoked due to inaccurate information presented herein or failure to abide by the terms of the Shelburne Food Truck Ordinance.

Applicants Signature

SUBMIT

FOR OFFICE USE ONLY

Date Received:
Fee Received:
Check #

FOOD TRUCK LICENSE
(Completed by Town Staff)

 DENIED*

Date: _____

***License denied based upon:**

1. _____
2. _____
3. _____

 APPROVED*

Date: _____

*License Approved based on information submitted for the license being true and correct with the following conditions:

1. The applicant and employees must comply with the requirements of the Food Truck Ordinance;
2. _____;
3. _____

LICENSE NUMBER: _____

START: _____

EXPIRATION: _____

Food Truck Location Information	
Street Number:	Street/Road Name:
Other Location Information:	

Licensee Information			
Name:			
Name of Operation:			
Address:	City:	State:	Zip:

Permit Description

Signature: _____
DRB Coordinator and Zoning Enforcement Officer