



45 N Second Avenue - Fruitport, MI 49415
(231) 865-3577 - office@fruitportvillage.org

FOOD TRUCK PERMIT APPLICATION

This application must be completed in full and approved by the Zoning Administrator of the Village of Fruitport before any food truck or food trailer sets up at an approved site. **The fee is \$150.**

Permit Applicant Information

Business Name _____

Owner Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Food Truck Owner Information (if different from above)

Business Name _____

Owner Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Proposed Food Truck Vehicle Type: Describe the food truck or trailer type and what kind of food is being served

Vehicle VIN # _____ Year _____ Make and Model _____

Dimensions of truck or trailer _____

Location, Date, and Time:

Area proposed to park for the operation (address or parcel # if street) _____

Proposed dates and hours _____

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Required Attachments

- _____ Site plan of location
- _____ Insurance policy (minimum coverage of \$1,000,000.00. See ordinance for details)
- _____ Plans for power access, water supply, waste disposal, and wastewater disposal
- _____ Copies of license and permits issued by the Muskegon County Health Department or State of Michigan
- _____ A signed statement that the permit holder shall hold harmless the Village, its employees, officers and agents and shall indemnify the Village, its employees, and officers and agents
- _____ A copy of the applicant's State issued Michigan sales tax license

Please read the Food Truck Ordinance #113 (or as amended) for all requirements

Affidavit

I certify and affirm that I am the property owner or the owner's authorized agent and that I agree to conform to applicable zoning and food truck laws of the Village of Fruitport and give authorization for this application. I also certify and affirm that this application is accurate and complete to the best of my knowledge. I hereby give permission for Village representatives to visit the proposed location.

Sign below as applicable:

Applicant Signature _____ Date _____

Landowner Signature (if applicable) _____ Date _____

Tenant Signature (if applicable) _____ Date _____

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Site Plan

Use the space below to draw a site plan showing the proposed location of the food truck.

* _____ * _____ * _____ * _____ * _____ * _____ * _____ * _____ * _____ *

* _____ * _____ * _____ * _____ * _____ * _____ * _____ * _____ * _____ *

Zoning Administrator Use:

Received Date _____ Application Approved Date _____ Fee Paid _____ Fee Paid Date _____

Zoned: Business or Publicly Owned (circle one)

Notes/Conditions _____

Application Denied Date _____ Reason for Denial _____

Zoning Administrator Signature _____ Date _____