

City Planner

Date

Code Enforcer

Date

City of Blanchard Food Truck Permit Application

DBA/Business Name:		
Truck/Vehicle Name:		
Sales Tax #		
Applicant Information	n	
Name:		Phone:
Address:		City, ST, Zip:
Email:		
Business/Location Inf Truck Year: Make	Formation e: Model:	License Plate #:
Address of Operation #1:		Zoning District:
Address of Operation #2:		Zoning District:
Daming I Itama		Г
Required Items () Copy of Liability Insurance Copy of Current () Driver's License # () Certification from Health Dept. Site Owner's () Written Permission (each location) () Site Plan of Location(s) (25.00 fee each site) () Copy of Sales Tax Remission		Fees First Application (1 Year): \$150.00 Annual Renewal: \$75.00 Single Day Permit: \$25.00
OF ORDINANCES GOVERNING THE		ARTICLE 10 OF CHAPTER 5, THE CITY OF BLANCHARD CODE THE CITY LIMITS OF BLANCHARD, OKLAHOMA. I HEREBY ON IS CORRECT AND ACCURATE.
Name:	Signature:	Date:
Plan Review Complete ar	nd Permit Approved by:	Application #

City Clerk

Date