

Town of Green Mountain Falls

P.O. BOX 524 GREEN MOUNTAIN FALLS, CO 80819 (719) 684-9414 greenmountainfalls.colorado.gov

Application for Mobile Food Truck License

Applicant Name:		
Business Name:		
Business Address:		
	Email:	
Vehicle Plate Number:		
Calendar of service dates (weekly, s	seasonal, etc.)/Hours of operation:	
Location truck will be parked/Publi	c or Private Property:	
Signature:		Date:

If location is on private property, other than your own, attach proof of permission to operate at the location. If the location requested is on public property, submit a separate statement indicating the manner in which the operation will comply with the terms of Municipal Code Section 6-105(a).

The Current Fee Schedule and Municipal Codes can be found on the Green Mountain Falls website. Fee payment required at time of application.

License Expires December 31st of the Current Calendar Year.

Other required submittals:

- Evidence of approval from El Paso County Health Department
- A proposed refuse control plan including a wastewater disposal plan

For Office use:	
	osed site attached (if private property) a) compliance statement (if public property) ent Approval
License Number:	Effective Date:
Clerk's Signature:	Date:
Mayor's Signature:	Date:
Date: Amount: Check Number: Credit Card	_