



Town of Green Mountain Falls

P.O. BOX 524

GREEN MOUNTAIN FALLS, CO 80819

(719) 684-9414

greenmountainfalls.colorado.gov

Application for Mobile Vendor License

Applicant Name: _____

Business Name: _____

Business Address: _____

Phone: _____ Email: _____

Vehicle Plate Number: _____

Calendar of service dates (weekly, seasonal, etc.)/Hours of operation: _____

Location truck will be parked/Public or Private Property: _____

Applicant 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.

License Expires December 31st of the Current Calendar Year.

For Office use:

Permission to operate on proposed site attached (if private property)
License Number: _____ Effective Date: _____

Clerk's Signature: _____

Date: _____

Amount: _____

Check Number: _____

Credit Card