



CITY OF SNOHOMISH

116 UNION AVENUE · SNOHOMISH, WASHINGTON 98290 · (360) 568-3115 · WWW.SNOHOMISHWA.GOV

MOBILE FOOD VENDOR SITE APPLICATION

Site Address: (where vehicle will be parked)	Date:
Land Use Designation/Zoning:	

ADJACENT BUSINESS OWNER:

Name:
Address:
City/State/Zip:
Phone:
Cell Phone:
Alternate Phone:
E-mail:

PROPERTY OWNER (IF DIFFERENT):

Name:
Address:
City/State/Zip:
Phone:
Cell Phone:
Alternate Phone:
E-mail:

QUESTIONS:

Has a vendor application been submitted to the City?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Distance (in feet) to nearest restaurant / Name or location of restaurant:	
What are the hours of operation for the vehicle(s)?	

FEE:

Mobile Food Vendor Location Review Fee:	\$50.00
Date Received:	Receipt #:

By signing below, I attest that I will abide by all the rules and conditions of SMC Chapter 5.02:

Signature of Business/Property Owner	Printed Name	Date
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Please also submit a **site map** showing the following information:

- Location of building entry
- Location of proposed vending unit(s)
- Location of available toilet and handwashing facilities (for vendors)
- Existing site improvements
- Ingress and egress locations
- Location of at least two customer parking spaces (if on private property)