

MOBILE FOOD VENDOR PERMIT APPLICATION

Are you applying as:	<input type="checkbox"/> A Current Mobile Food Vendor <input type="checkbox"/> A new Mobile Food Vendor applying for the first time <input type="checkbox"/> A fixed food business from the Adelaide Hills Council District
APPLICANT DETAILS	
Applicant Name:	
Business Trading Name:	ABN:
Applicant Mailing Address:	
Applicant/Business Telephone Number:	
Email Address:	
Public space requested	<input type="checkbox"/> Tregarthen Reserve, Summertown <input type="checkbox"/> Centennial Park, Lenswood <input type="checkbox"/> Paracombe Oval, Paracombe <input type="checkbox"/> Gillman Road Parking Bay, Oakbank <input type="checkbox"/> Other – Please specify
Dates requested:	From _____ to _____ *Please note Adelaide Hills Council requires minimum 7 working days to process your request
Times requested:	
Vehicle Type:	
Vehicle Registration:	
Description of hire activity:	
Proposed Food & Beverage for sale:	
Parent Council:	
Food Business Notification Number:	
Do you hold a Food Safety Passport?	YES / NO <i>(If no, Adelaide Hills Council may require to inspect your food business, which will incur additional fees)</i>
Have you ever been prohibited from holding a permit? YES / NO	Name of Council: _____ Date of Issue: _____ Expiry: _____
Permit Required (please circle one)	MONTHLY / ANNUAL/SPECIAL EVENT

Hereby make Application to Adelaide Hills Council for Mobile Food Vending to sell food and beverages to the public at any of the pre-approved trial sites contained within Council's Location Rules.

- I acknowledge and agree that the **Mobile Food Vending Business Location Rules** provide site specific rules to observe and obey at all times or fines or other penalties may apply.
- I understand and agree that if I am an approved Mobile Food Vendor I may relocate my vehicle and set-up at any time to another approved site on the **Mobile Food Vending Business Location Rules**, subject to site availability, but to ensure public safety, I must not trade between sites 'along the road' in unapproved locations, roadside or other.
- I acknowledge and agree that Council's **Mobile Food Vending Business Location Rules** is a new initiative, and is subject to change at any time, they may be added, removed or location altered dependent on the community feedback received.
- I acknowledge and agree that I am responsible for the appropriate disposal of all liquid waste and other trade waste off site.
- I acknowledge and agree that I am responsible for the removal of all rubbish and equipment from each approved side and I must not dispose of the rubbish in nearby Council bins.
- I acknowledge that a fee applies to become a registered Mobile Food Vending Business within the Adelaide Hills Council district.

PLEASE ATTACH THE FOLLOWING ITEMS:

- Copy of current Public Risk Insurance to a minimum of twenty million dollars (\$20,000,000) which notes Adelaide Hills Council as an interested party.
- Provide proof of notification of a food business with the local Council's Environmental Health section approving Mobile Food Vending
- Image showing your registered Mobile Food Vehicle and proposed set up (chairs/tables/umbrellas etc).
- Evidence of payment of Mobile Food Vendor Fee (non-refundable) for the term applied for. To arrange payment you may visit one of our Council Offices, or call 8408 0400, ask to speak with a customer service staff who can arrange payment please quote '**FOOD TRUCKS**'. Include your receipt number below as evidence.

STATEMENT OF COMPLIANCE

- I have read and understood the Adelaide Hills Council Mobile Food Truck Permit Terms and Conditions and agree to comply with the conditions, guidelines and standards set therein.

Name:	
Signature	
Date:	

OFFICE USE ONLY

<input type="checkbox"/>	INSURANCE RECEIVED:	YES	NO
<input type="checkbox"/>	FOOD BUSINESS NOTIFICATION NO:	_____	
<input type="checkbox"/>	FOOD SAFETY PASSPORT:	YES	NO
<input type="checkbox"/>	INSPECTION REQUIRED:	YES	NO
<input type="checkbox"/>	PERMIT:	APPROVED	DECLINED
<input type="checkbox"/>	FEE:	\$ _____	
<input type="checkbox"/>	INVOICED	YES	NO
<input type="checkbox"/>	PERMIT NUMBER:	_____	
<input type="checkbox"/>	Date Issued:	_____	