

## **FOOD CART LICENSE APPLICATION**

Applicant Information	□ New Cart	□ Renewal
Food Cart Owner Name:	Phone:	
Mailing Address:		
Email Address:		
Business Name:	Phone:	
Location of Food Cart (address):		
Tax Lot No(s):		
Lot Size: sq. ft.	Zoning:	
Describe location of food unit on site:		
Oregon Health Authority Food Service License Number:		
Food Cart Dimensions:		
Application Requirement Checklist:  City of Estacada Business License Application Review EMC 16.66. Initial: I confirm that this food cart will not provide distinct the cart. Property owner consent letter with signatures of all prope Application fee (see current fee schedule) – you can pay or of Estacada.  A site plan or aerial map, drawn to scale, of the entire properous Food cart location (must be on a paved surface). Measurements from cart to property lines, structured All accessory items (tables, chairs, etc.), storage are Notes on how the food cart will be supplied with water Trash receptacle location(s) (at least one receptacled Designated off-street parking space(s) as required Nearby pedestrian pathways, driveways, parking space Restroom available to employees and, if applicable Proof of Clackamas County Health license. Pictures of food cart interior and exterior.	erty owners nline, over the phone, or ma perty showing: res, and other food carts. reas, and vehicle parking sp ater, electricity, and wastew le for customer use is requir for each food cart. paces, and property lines. e, customers (see 16.66.110	paces. vater services. ired)
THIS LICENSE SHALL TERMINATE AND BE RENEWABLE ON DE AGREED THAT I WILL COMPLY WITH THE PROVISIONS OF SECT CHAPTER 624 OREGON REVISED STATUTES, AND ADMINISTRA PERTAINING THERETO.	TION 16.66 OF THE ESTACAL	DA MUNICIPAL CODE,
Signature of Cart Owner/Applicant:	Date:	

Property Owner Information		
Property Owner Name:	Phone:	
Mailing Address:		
Email:		
I (we),, am the legal owner(s Property Owner's Name(s)	) of the property located at,	
, and hereby grant permission to _		_, to operate a
Property Address	Food Cart Owner's Name	
food cart on my property at the specified location.		
Property Owner Signature:	Date:	
Property Owner Signature (if more than one):	Date:	

## DO NOT WRITE UNDER THIS LINE

CITY STAFF REVIEW		
Is the location of the food cart in a zone where food carts are permitted t	o operate? □ Yes / □ No	
<ul> <li>Are there any other food carts on the lot this applicant is intending to use</li> <li>If yes and it is more than two carts, conditional use approval is requirement and process.</li> </ul>		
Was an OHA license number included? $\square$ Yes / $\square$ No		
Do the food cart dimensions follow the maximum size requirements in th	ne code? 🗆 Yes / 🗆 No	
Did the applicant initial confirming the proposed food cart will not provid the cart? $\ \square$ Yes / $\ \square$ No	e drive-thru services or allow customers into	
Did the applicant provide a property owner consent letter with signature	s from all property owners? $\square$ Yes / $\square$ No	
Has the applicant paid the food cart permit fee? $\ \square$ Yes / $\ \square$ No		
<ul> <li>Was a site plan submitted showing all the requirements in the checklist</li> <li>Does the surface and parking follow the code? ☐ Yes / ☐ No</li> <li>Do the setbacks and separation distances indicated follow the code?</li> <li>Do all accessory items, structures, and storage indicated follow the o</li> <li>Do the notes regarding water, electricity, and wastewater follow the</li> <li>Is a trash receptacle shown? ☐ Yes / ☐ No</li> <li>Does the food cart or its accessories obstruct vehicular, pedestrian, intersections, or landscaping? ☐ Yes / ☐ No</li> <li>Is the food cart parked in any public right of way access? ☐ Yes / ☐ No</li> <li>Do the windows and doors used for service follow the code? ☐ Yes / ☐</li> <li>Does the food cart follow restroom or portable toilet code requirement</li> </ul>	□ Yes / □ No  code? □ Yes / □ No  code? □ Yes / □ No  bicycle, transit facilities, public signage,  No □ No	
Did the applicant submit proof of County approval? $\ \square$ Yes / $\ \square$ No		
Were pictures of the interior and exterior submitted? $\ \square$ Yes / $\ \square$ No		
FOR OFFICE USE ONLY		
Public Works Approval:	Date:	
Fire Department Approval:	Date:	
Planning Division Approval:	Date:	