



**ONE DAY FOOD TRUCK EVENT PERMIT**

**FEE: \$200.00**

**NAME OF EVENT \_\_\_\_\_ DATE OF EVENT \_\_\_\_\_**

**NAME OF PERSON OR ORGANIZATION IN CHARGE OF EVENT**

\_\_\_\_\_

**NAME OF FOOD TRUCK(S) INCLUDING VEHICLE MAKE, MODEL, PLATE NO.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(If additional space is needed, please use back of form to continue)**

\_\_\_\_\_  
**VEHICLE OWNER'S CONTACT INFORMATION**

\_\_\_\_\_  
**VEHICLE OPERATOR'S CONTACT INFORMATION**

**BY SIGNING THIS PERMIT, ALL PARTIES INVOLVED ARE AGREEING TO THE LISTED REQUIREMENTS FOR OPERATION OF A FOOD TRUCK AT THE PLANNED EVENT.**

\_\_\_\_\_  
**SIGNATURE OF PERSON IN CHARGE OF EVENT**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**SIGNATURE OF FOOD TRUCK OWNER**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**SIGNATURE OF FOOD TRUCK OPERATOR**

\_\_\_\_\_  
**DATE**

**CERTIFICATE OF LIABILITY INSURANCE NAMING THE BOROUGH OF LAVALLETTE AS ADDITIONALLY INSURED IN THE AMOUNT OF \$1,000,000 MUST ACCOMPANY THIS FORM.**