



CITY OF LAKE CITY MOBILE FOOD SALES APPLICATION

City of Lake City - Growth Management
173 NW Hillsboro St.
Lake City, FL 32025
Phone - (386) 719 - 5754
BTR@lcfla.com

Application No: _____
Date Received: _____

Submittal Type

- Property Owner
Authorized: Shall be a notarized letter from the property owner of record or authorizing agent*
- Proof of Ownership*
- Legal Description*
- Site plan showing:*
 - *Lot Dimensions,*
 - *Location of Mobile Foods service (with all details of set-up), showing all parking on private property ensuring that the required spaces for the primary establishment are available*
 - *Setbacks of set-up from property and right-of-way lines, driveways, and any existing site improvements*
- Copy of Business Tax Receipt*
- Application Fees \$105.00 the first year and \$80.00 renewal fee after*

In accordance with Chapter 26, Section 8 of the City Ordinance Code, authorization for Mobile Food Sales is issued to:

Business/Applicant:

Name: _____
Agent/Lessee: _____ BTR License #: _____
Address: _____
Email: _____ Phone: _____
Address of Event: _____
Dates of Event: _____ Hours: _____
Description of Event: _____

Property Owner:

Name: _____
Email: _____ Phone: _____
Address of Sales Lot: _____
Parcel Number: _____
Non-Profit Organization Name: _____ Tax ID#: _____

I CERTIFY THAT, to the best of my knowledge and belief, all information supplied with this application is true and accurate, and that I am:

- Owner of the property described herein.**
- Party to an agreement for deed or sales contract for the purchase of the property.** (If this area is checked, you must be specifically authorized in the contract, or by another legal document, to initiate an application for this request.)
- Agent for the owner or purchaser of this property.** (If you checked this area, a written notarized authorization letter from the property owner(s), to act on their behalf, must accompany this request.)

Signature: _____ Date: _____

Printed Name: _____

For Office Use Only

Date of Issuance: _____
Effective Date: _____
Expiration Date: _____
Location of sales: _____
Zoning Approval: _____

****VALID BUSINESS TAX RECEIPT MUST BE OBTAINED PRIOR TO THE ISSUANCE OF A FOOD TRUCK SPECIAL EVENT PERMIT****



CITY OF LAKE CITY AGENT AUTHORIZATION FORM

I/We, as the owner(s) of real property in City of Lake City, Florida, which is described below do hereby authorize the following person or persons to act as my/our agent to execute any petitions, applications, or other documents necessary to affect the application approval requested and more specifically described below, and to appear on my behalf before any administrative or legislative body in the County concerning the application(s) and to act in all respects as my/our agent in matters pertaining to the requested application(s).

Agent information [PLEASE PRINT]

Name(s): _____
Company: _____
Phone: _____ Email: _____

Requested Application(s): _____

Subject Property [PLEASE PRINT]

Address: _____
Parcel ID(s): _____
Legal Description: _____
_____ See Attached

Property Owner(s) Information [PLEASE PRINT]

Property Owner Name(s): _____
Address: _____
Phone: _____ Email: _____

SIGNED AUTHORIZATION

Date	Signature	Printed Name of Property Owner
Date	Signature	Printed Name of Property Owner

STATE OF FLORIDA
COUNTY OF COLUMBIA

The forgoing document was (or affirmed) and subscribed to before me this ____ day of _____ 20__ by _____ Who is personally known to me or who produced _____ as identification.

Public Notary Seal:

Signature of Notary
Notary # _____
My Commission Expires: _____