



Mobile Food Service Vehicle (MFSV) Application

Town of Kingston Springs, Tennessee

This application must be filled out completely with all required documentation included. Application for a permit does not guarantee that a permit will be granted. Application approval is based on compliance with the Mobile Food Service Ordinance (as codified in Chapter 2, Title 9 of the Town's Municipal Code) and with all state and local health requirements. A Mobile Food Service Vehicle (MFSV) CANNOT operate in the Town of Kingston Springs, Tennessee unless the MFSV has an approved permit and complies with all applicable laws and regulations.

APPLICANT INFORMATION:

MFSV Name:	
Business Website:	
MFSV Owner:	
Owner Address:	
Owner Phone:	
Owner Email:	
MFSV Operator Name:	
MFSV Operator Phone:	
Proposed Service Location:	
Days / Hours of Operation	

LICENSING:

TN Department of Health License Number:	
Cheatham County Business License Number:	
Applicant Driver License Number and State of Issuance: (attach copies of all drivers of the MFSV)	

VEHICLE INFORMATION:

Vehicle Make:	Vehicle Model:	Vehicle Year:		
Vehicle License Plate Number (please include copy of vehicle registration):				
Vehicle Weight (if over 26,000 lbs. a Commercial Driver's License is required):				
Will MFSV use a Deep Fryer or Flat Top Griddle for Food Preparation?:	YES:		NO:	
Will Propane be used on the MFSV?:	YES:		NO:	
Is the MFSV equipped to Shore Power?	YES:		NO:	



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Please include the following documentation with this application:

- Copy of current Cheatham County Business License
- Copy of the state or county health department license or permit applicable to mobile food providers currently issued to the Operator
- Copy of Tennessee Department of Health Inspection Report within last 60 days (minimum 80% or better)
- Copy of Drivers Licenses for all vehicle drivers
- Copy of MFSV Vehicle Registration
- Proof of current Vehicle Insurance
- Photos of MFSV (inside, front, side, back)
- Written authorization from property owners at the specified location allowing sales
- A copy of the current Fire Marshal's inspection report;
- A copy of any current alcoholic beverage licenses, if applicable.

OFFICE USE ONLY

APPLICANT DO NOT WRITE BELOW THIS LINE

PERMIT APPROVED: APPROVAL DATE: _____

PERMIT EXPIRATION DATE: _____

PERMIT DENIED: DENIAL DATE: _____

REASON FOR PERMIT DENIAL (if applicable):

Permit Fees:

Annual Permit (valid for one year): \$75.00 (00000)

Date Paid: _____

Amount Paid: _____

Receipt Number: _____