



STRICKFADEN PARK PAVILION
MOBILE FOOD UNIT APPLICATION

318 Bell Ave, Sandusky Ohio 44870

PERKINS TOWNSHIP

2610 Columbus Ave, Sandusky Ohio 44870

Phone: 419-609-1433 www.perkinstownship.com

Applicant Name: _____ Applicant Phone Number: _____

Address: _____

Date & Time of Event: _____

Applicant's Email Address: _____

FEES

\$25.00 PER DAY

\$150.00 TRANSIENT VENDOR APPLICATION: applications can be found on our website www.perkinstownship.com.

Applications for Transient Vendor must be submitted to the Perkins Township Community Development Department.

OFFICE USE ONLY

PAYMENT

Amount: \$ _____ Date Paid: _____ Paid by: _____

Approved by: _____ Date: _____

Mobile Food Unit Applications may be mailed or dropped off to Perkins Township Public Works Department, Attn: Brittany Henley, 2610 Columbus Ave, Sandusky Ohio 44870.

The mobile food unit must abide by the following rules:

- The mobile food unit will not block entrance to and exit from the lot upon which it is situated.
- The mobile food unit will not block fire hydrants, fire lanes, handicap parking spaces, or the lawful signs of any other business.
- The operator of the mobile food unit has the permission of Perkins Township for the day, time, and location of operation.
- The mobile food unit is in good repair and does not display obscene or graphic images.
- The mobile food unit serves only pedestrians and does not offer outdoor seating.
- The mobile food unit only operates between the hours of 10:00 a.m. and 8:00 p.m. Times can be extended per written request submitted to Township Administrator and if approved by Township Administrator.
- The mobile food unit is licensed by the Erie County Health Department.

- No Transient Vendor permit will be issued unless the applicant furnishes proof of insurance policy issued by an insurance company, licensed to do business in the State, protecting the licensee and Perkins Township from all claims for damages to property and bodily injury, including death, which may arise from operations under or in connection with the license in the amount of not less than one million (\$1,000,000.00) dollars. Such insurance shall name as additional insured Perkins Township and shall provide that the policy shall not terminate or be canceled prior to the expiration date without thirty (30) days advance written notice to Perkins Township.
- The mobile food unit is in possession of a valid business license.
- The mobile food unit offers trash receptacles for customer use located no more than 10 feet from the unit.
- No more than one (1) sign may be displayed.
- The mobile food unit has no exterior lighting.
- The mobile food unit generates no excessive noise that is plainly audible at twenty-five (25) feet.
- The mobile food unit must supply their own water and power source.
- The mobile food unit is in compliance with the Ohio Fire Code.

IN WITNESS WHEREOF, Applicant and Responsible Party (if other than Applicant) have signed this Application and Agreement at Sandusky, Ohio this _____ day of _____, 20____, agreeing to be bound by all terms contained herein.

APPLICANT SIGNATURE: _____ DATE: _____

RESPONSIBLE PARTY: _____