

MOBILE FOOD OR RETAIL VENDOR PERMIT APPLICATION

COMMUNITY DEVELOPMENT DEPARTMENT

33325 8th Avenue South Federal Way, WA 98003 253-835-2607; Fax 253-835-2609 www.cityoffederalway.com

This permit application is for Class III mobile food or retail vendors accessory to an established use on the property as required by FWRC 19.290.060 and 19.290.080.

MAILING ADDRESS E-MAIL CITY STATE ZIP FAX Doing Business As (DBA) (if different than business name) Wehicle Registration # WA State UBI # Property Address/Location Parcel Number Joning Designation Describe Goods to be Sold/Business Activity Pehicle Specifications:	FILE NUMBER Date				
Applicant NAME (if different than owner) Applicant PHONE NUMBER MAILING ADDRESS E-MAIL CITY STATE ZIP FAX Doing Business As (DBA) (if different than business name) WA State UBI # roperty Address/Location arcel Number oning Designation pescribe Goods to be Sold/Business Activity dehicle Specifications:	APPLICANT INFORMATION				
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	Dimensions:	Height: _		Weight:	

All application materials must be submitted electronically. Please visit our website at https://www.cityoffederalway.com/node/4588 to request a document upload link and obtain information on how to successfully prepare your application materials for electronic submittal and review.

SUBMITTAL DOCUMENTS Sub. Req. **Completed Mobile Food or Retail Vendor Permit Application** Site Plan: Plans must be drawn to scale and include a north arrow 1. Show ingress and egress. 2. Location of the mobile vending unit on the property. 3. Location of existing structures on the property. 4. Location of garbage and recycling container for customers. 5. Number of parking stalls occupied by vehicle; include pedestrian lines/waiting areas. A photograph of the mobile vending unit, proposed signs, and any equipment King County Department of Public Health Approval for mobile vendors that sell food or П beverages. **Signed Mobile Food or Retail Vendor Supplemental Checklist** The checklist must be filled out, signed, and submitted using the following website: https://docs.cityoffederalway.com/Forms/Mobile-Vendor-Checklist

	Date	
Signature of Owner:		
	Date	
Signature of Applicant (if different than owner)		

TO BE COMPLETED BY STAFF 1) The mobile vending activity will not be detrimental to the public health, safety, and general welfare. ☐ Yes ☐ No (explanatory narrative attached) 2) The mobile vendor will not adversely affect adjacent properties. ☐ Yes ☐ No (explanatory narrative attached) 3) The mobile vendor can be adequately served by public facilities and street capacities without placing an undue burden on such facilities and streets. ☐ Yes ☐ No (explanatory narrative attached) 4) The application is compliant with all relevant city codes and policies and the supplemental checklist. ☐ Yes ☐ No (explanatory narrative attached) 5) The proposed property(s) or site(s) for the mobile vendor's operations are of sufficient size to accommodate the mobile vendor. ☐ Yes ☐ No (explanatory narrative attached) 6) Conditions of Approval ☐ Yes □ No Conditions Attached: ☐ Yes □ No In accordance with FWRC 19.290.080, this application is hereby: ☐ Approved □ Denied Community Development Director Date Permit approval is permanent until and unless the City receives notification that there has been a renewal or change requested to the vendor's business; FWRC 19.290.080(5).