



OFFICE USE ONLY

CASE NO.: _____
 DATE RECEIVED: _____
 BY: _____

SPECIAL USE PERMIT APPLICATION

FOOD TRUCK SPECIAL USE PERMIT – *Must include required submittal materials and [completed checklist](#)*

Name of Event:	
Applicant:	
Address:	City/State/Zip:
Phone:	Email:
Property Owner:	
Address:	City/State/Zip:
Phone:	Email:

I (we) do hereby affirm and certify, under penalty of perjury, that I am one (or more) of the owners or owner under contract of the herein described property and that the foregoing statements and answers are in all respects true and correct on my information and belief as to those matters, I believe it to be true.

Applicant Signature _____ **Date** _____

Property Owner Signature _____ **Date** _____

PROPERTY LOCATION	
Address:	
Building or Project Name:	Parcel Number:
Zoning Designation:	Acreage or parcel size:
Existing uses on site:	

EVENT INFORMATION

Please use the space provided below to describe your proposed event: *(Food Truck applicants must complete the related [checklist](#) and provide all required documentation)*

- Expected number of participants: _____
- Date(s) and time(s) of proposed event: _____
- This application should be accompanied by a written statement of justification for approval of the special use permit which meets the criteria in GHMC 17.68.050, a site plan showing proposal location and layout of the event, the original and three copies of all documents