



Rebecca Markham <[rmarkham@ci.sandy.or.us](mailto:rmarkham@ci.sandy.or.us)>

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## Fwd: Mobile unit application/Inspection

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**Kristyn Schwartz** <[sugarpineespresso@gmail.com](mailto:sugarpineespresso@gmail.com)>  
To: Rebecca Markham <[rmarkham@ci.sandy.or.us](mailto:rmarkham@ci.sandy.or.us)>

Tue, Oct 1, 2024 at 10:29 AM

Good morning. Here is the signed approval from Christy from the health department.

----- Forwarded message -----

From: **Yeoumans, Christy** <[CYeoumans@clackamas.us](mailto:CYeoumans@clackamas.us)>  
Date: Tue, Oct 1, 2024 at 10:26 AM  
Subject: Re: Mobile unit application/Inspection  
To: Kristyn Schwartz <[sugarpineespresso@gmail.com](mailto:sugarpineespresso@gmail.com)>

Kristyn,  
Here is your signed license approval dated 10/1. Please feel free to reach out with any questions.  
Christy

200

**CLACKAMAS COUNTY**

**MOBILE UNIT, COMMISSARY & WAREHOUSE LICENSE APPLICATION**  
 Environmental Health Department  
 Phone: 503.655.8384 - Fax: 503.742.5352

**ENTERED**

Mobile Unit # 033743 Commissary # \_\_\_\_\_ Warehouse # \_\_\_\_\_

Name of Unit: Sugar Pine Espresso

Location of unit when in operation: 38424 Pioneer Blvd. Sandy OR

Name of applicant (Owner): Kristyn Schwartz Telephone number: 971-409-3402

Email address: sugarpineespresso@gmail.com

Applicant mailing address: PO Box 275 Estacada OR 97023

Warehouse or Commissary address: \_\_\_\_\_

**LICENSE FEE MUST ACCOMPANY THIS APPLICATION - SEE FEE SCHEDULE**

FACILITY TYPE	FEE
MOBILE UNIT = <u>Class I - Class II - Class III - Class IV</u> Circle One	<u>397</u> prorated open Oct 1 - ?
COMMISSARY = _____	PAID \$ <u>397</u>
COMBO-COMMISSARY = _____	SEP 17 2024
WAREHOUSE = _____	CHK <u>CC</u> By <u>th</u>
TOTAL FEE ENCLOSED = _____	

MAKE ALL CHECKS PAYABLE, AND MAIL TO: CLACKAMAS COUNTY COMMUNITY HEALTH DIVISION  
 2051 KAEN ROAD # 367 - OREGON CITY OR 97045

ALL LICENSES ISSUED UNDER THIS ACT SHALL TERMINATE AND BE RENEWABLE ON DECEMBER 31, OF EACH YEAR. IT IS AGREED THAT I WILL COMPLY WITH THE PROVISIONS OF CHAPTER 624, OREGON REVISED STATUTES, AND ADMINISTRATIVE RULES OF THE OREGON HEALTH DIVISION PERTAINING THERETO.

KSchwartz Signature of Applicant & Title Date 9/11/2024

DO NOT WRITE IN THIS SPACE

APPROVED BY: [Signature] DATE APPROVED: 10/1/24

REMARKS: from etc all same

**-ATTENTION-**

THE COMMISSARY AGREEMENT ON THE BACK OF THIS FORM MUST BE COMPLETED BEFORE THIS APPLICATION CAN BE ACCEPTED.

Sent from my iPhone

On Sep 13, 2024, at 4:56 PM, Yeoumans, Christy <[CYeoumans@clackamas.us](mailto:CYeoumans@clackamas.us)> wrote:

Kristyn,

Will you be keeping the cart exactly the same( menu etc.?) If so you will not have to do a plan review and an application will be fine. You will want to submit it to our main office. Once the application makes it over to me I will give you a call about your plans etc. and we can go from there. The whole process should be pretty quick and simple if it is generally just a change of ownership. Hope that helps.

Christy

**From:** Kristyn Schwartz [mailto:[sugarpineespresso@gmail.com](mailto:sugarpineespresso@gmail.com)]

**Sent:** Friday, September 13, 2024 11:11 AM

**To:** Yeoumans, Christy <[CYeoumans@clackamas.us](mailto:CYeoumans@clackamas.us)>

**Subject:** Mobile unit application/Inspection

**Warning: External email. Be cautious opening attachments and links.**

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Hello Christy, my name is Kristyn. I got your contact from Mandy from Real time roasters. I am the one buying her walk up stand in Sandy OR. I have filled out the paperwork for the mobile unit. Would I be emailing you that or do I need to bring it to your office? As far as opening, do I need to schedule an inspection with you? Do you need anything other than the mobile unit application for me? Sorry for all the questions. I just don't want to miss anything. Thank you for your time.

Thank you,

Kristyn Schwartz

971-409-3402