

Food and Beverage Cart Application

1 page

| File #: Dat | | Business License # |
|----------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| | A. C. | Staff Use Only |
| Signature Veli III | eit | Signature |
| Phone 971-409-2 | 3402 | Phone |
| SUMARP. Me espre | sso@gmail. | |
| Email | | Email |
| City/State/Zip ESTUCCICL Q OR | 07073 | Brightwood OVE 97011 |
| Address PO BOX 275 | | Address 62767 ERUSUS RD LN City/State/Zip |
| Kristyn Schu | | Jerry Carlson |
| Applicant (if different than owner | | Food Cart Pod Owner / Property Owner |
| 2010 B. (1981) - H. (1981) | application that the states | and the Sandy Fire District Fire Marshall. ments and information contained herein are in all respects true, the best of my knowledge and belief. |
| Please Note: Prior to opening, the | applicant must first rece | eive a Final Order from the City of Sandy along with completed |
| A Prochate Prod | | trict Fire Marshall (Gary Boyles - fmboyles.sandyfire@gmail.com) |
| City of Sandy Busine | | |
| Written approval fro | m Clackamas County | Health Department |
| Pictures of the cart | | |
| Fee \$212 | Sabint the following | ig items with this application |
| (excluding trailer hitch) | 350sq Pt | ng items with this application: |
| Length/Size of Cart: | 2500 - Pt | Awning Height: |
| Name of Food Cart Pod: | 4460 | |
| Location or Address: | 8424 Pior | reer Blvd. Sandy DR 97055 |
| Name of Business: | Sugar Pin | e Espresso |
| | | |