



City of Whitefish
 Planning & Building Department
 PO Box 158 | 418 E 2nd Street
 Whitefish, MT 59937
 Phone: 406-863-2410

File #: _____
 Date: _____
 Intake Staff: _____
 Check # _____
 Amount _____
 Acct #: 1000 101000 341061
 Date Complete: _____

FOOD VENDOR PERMIT APPLICATION

FEE ATTACHED \$ _____
 (see current fee schedule)

INSTRUCTIONS:

- A pre-application meeting with city staff is required. Date of pre-application meeting: _____
- Completed application, including a written statement addressing each of the criteria described below and application fee.
- A 'to scale' site plan, showing cart location and dimensions to property line.
- Photos or drawings of cart/trailer, with overall dimensions of cart and any attached signs.
- Food vendor permits are available for either 30-day or 12 month periods, no more than six consecutive hours per day. Vendors who do not meet conditions of approval will be revoked or not renewed. Permits are not issued until notification of neighboring property owners and a legal ad in the newspaper, subject to a 14 day comment period. Vendors are required to provide a certified nearby property owner list (150') from Flathead County GIS with their application. Renewals do not require notification of neighboring properties or a legal ad, but may be subject to additional conditions of approval.
- A valid complaint that the vendor is not meeting one of the required conditions of approval may result in revoking or denial of permit renewal. Appeals of a permit denial can be made through the Planning Department to the City Council for a fee, and a public hearing will be scheduled at their next available meeting.

A. VENDOR INFORMATION:

Business Name: _____

Physical Address of Vending site: _____

Assessor's Tract No.(s) _____ Lot No(s) _____

Block # _____ Subdivision Name _____

Section ____ Township _____ Range _____

Zoning District: _____

Length of time requested: 30 Days 12 Months Renewal

B. APPLICATION CONTENTS:

Attached ALL ITEMS MUST BE INCLUDED - INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

_____ Letter from property owner giving permission to set up on the property for the length of time indicated, as well some proof that restroom facilities can be provided nearby for employees

_____ Site plan showing location of sales facility with setbacks including compliance with Food Vendor setbacks in §11-3-23(B)(3) and (B)(10), location of required garbage can for customers, customer queuing, parking locations and layout and traffic circulation, if necessary

_____ Sign plan showing the size and content of sign allowed attached to cart

_____ Proof of an insurance policy, issued by an insurance company licensed to do business in the state for:

- a. Public liability insurance in an amount of not less than \$500,000 for injuries, including those resulting in death, resulting from any one occurrence, and on account of any one accident; and
- b. Property damage insurance in an amount of not less than \$25,000 for damages on account of any one accident or occurrence

_____ Proof of a valid Flathead County Food Service Permit. Date approved: _____

_____ Copy of Whitefish City Business License

C. PROPERTY OWNER(S) OF RECORD:

Name: _____ Phone: _____

Mailing Address: _____

City, State, Zip: _____

Email: _____

APPLICANT (if different than above):

Name: _____ Phone: _____

Mailing Address: _____

City, State, Zip: _____

Email: _____

NON-PROFIT: YES NO

D. MENU/DESCRIPTION OF FOOD ITEMS TO BE SOLD:

PROPOSED HOURS OF OPERATION and DAYS/WEEK: _____

PROPOSED DATES OF OPERATION: 30-Day _____ to _____

12 Month Permit Start Date: _____

E. REVIEW CRITERIA: The following criteria form the basis for approval or denial of the Food Vendor Permit (§11-3-23). The burden of satisfactorily addressing these criteria lies with the applicant. Review the criteria below and discuss how the proposal conforms to the criteria. If the proposal does not conform to the criteria, describe how it will be mitigated.

A. Vendor stand must be located on private property, have the property owner's permission and have permission to use nearby restroom facilities for employees.

B. Site Plan:

1. No seating or other customer service shall be provided on site.
2. A drive thru is not permitted.
3. A trash receptacle shall be provided for customers and shall be emptied daily. The site shall be free of trash/litter at the end of each business day.

C. Sales Facility:

1. Facility shall be portable. This standard is met if set-up and tear-down time does not exceed 30 minutes. The facility shall always be attended and shall be removed at the end of each shift. Sites must be vacated by 3 a.m.
2. Vendor must have building/cart physically inspected and approved by the City of Whitefish Building Official for health and safety prior to the start of business.
3. The method of electricity shall meet the requirements of §11-3-23(B)(7) and may require an electrical permit.
4. Provisions for water and sewer shall comply with the requirements of §11-3-23(B)(5) and (B)(6).
5. A five-pound ABC Fire Extinguisher is required if a heating or cooking appliance is used.

D. Signage shall comply with §11-5-6, but in no case shall exceed 20 square feet. All signage shall be attached to the sales facility. No sidewalk or banner signs are permitted.

E. The vendor shall provide proof of a valid Flathead County Food Service Permit. All applicable laws, rules and regulations regarding food handling and preparation shall be adhered to – including all requirements for mobile vendors.

F. Vendor must have a valid City of Whitefish business license and agree to report all Resort Tax revenue, as required.

Required Signatures

I hereby certify that the information contained or accompanied in this application is true and correct to the best of my knowledge. The signing of this application signifies approval for the Whitefish Staff to be present on the property for routine monitoring and inspection during the approval and development process.

Owner's Signature¹

Date

Print Name

Applicant's Signature

Date

Print Name

Representative's Signature

Date

Print Name

----- **For City Staff Use Only** -----

- 30 Day permit valid from: _____ to _____
- 12 Month Permit valid from: _____ to _____

| |
|--|
| <u>Inspection:</u> (date & initial) <input type="checkbox"/> Planning _____ <input type="checkbox"/> Public Works _____ <input type="checkbox"/> Building _____ |
|--|

CONDITIONS OF APPROVAL:

Approved by: _____
Planner Signature

Date: _____

¹ May be signed by the applicant or representative, authorization letter from owner must be attached. If there are multiple owners, a letter authorizing one owner to be the authorized representative for all must be included