**Orangeburg County Fire District** 131 Firefighter Lane



Orangeburg SC, 29115 (803) 533-62189

## MOBILE FOOD VENDOR PERMIT APPLICATION

PART A	IDENTIFICATION			
Name of Business		City	State	Zip Code
Phone Number		Email Address		
Name of Owner/Operator (required):	l			
			<b>.</b> .	
Address	City		State	Zip Code
Phone Number	<u> </u>		Email Address	
Filone Number			Linaii Address	
PART B DETAILED INFORMATION				
Location of Operation	Perrmit Duration		Hours of Operation	Food Vending Method
Date of Event:	1 Day - 3 Days		From	
		Week		Drivable
Event Name	30 Days		То	Pull Trailer
		Other Days		Push Cart
Event Location				Stand Alone
				Tent
PART C		CHECK		
Please include the following items with your completed application:				
Complete menu of food being sold.			Additional Comments for Fire Marshal	
Proof of SC DHEC Permit.				
Proof of Insurance.				
Copy of Orangeburg County Business License.				
Letter of approval from property owner if operating on private property.				
Proof of latest inspections, i.e. (suppression system, hood cleaning, gas system)				
Owner's Certificate: I hereby certify that I a	s a Mok	oile Food Vendor S	SHALL abide by the currer	nt IFC and
NFPA 1, 58 & 96.				
Applicants Signature: Date:				
FOR OFFICE USE ONLY				
Approval by / Title:		Approval Date:		Permit Number: