



Itinerant Merchant Application

Dallas Planning Department

Official Use Only:
File No.: _____
Date: _____
Fee: _____ PAID

Section 1 – Applicant Information

Name(s): _____
Mailing Address: _____
Email: _____
Phone Number: _____ Cell Number: _____

Section 2 – Business Information

Business Name(s) _____
Mailing Address: _____
Email: _____
Phone Number: _____ Cell Number: _____

Section 3 – Business Description

Please describe your business including products and /or services for sale:

Is this a Food Cart business? _____
How long will you be conducting business? _____
Days and hours of operation: _____
(Note: Three (3) month maximum per calendar year per location)
(Note: Food Carts shall be permitted to remain in approved location for a period of six (6) months and shall be allowed to renew for another six (6) months upon submission of new application)

Section 4 – Itinerant Business Location Information

Itinerant Business Location: _____
Name of Property Owner: _____
Signature of Property Owner: _____
Note: Site plan is required. Please attach a site plan demonstrating placement of sales area, customer vehicle parking, traffic circulation, and ingress and egress of vehicles from public street.

OVER

Section 5 – Additional Information

Do you intend to conduct business in the Public Right-of-Way? Yes No

Applicants using vehicles must provide additional proof of insurance with the City of Dallas shown as an additional name insured. A copy of the vehicle certificate of insurance must be submitted with this application.

Proof of Insurance Required.

Insurance Company: _____

Address and Phone: _____

Email Address: _____

Policy Coverage Limits: _____

If intending business in the Public Right-of-Way, describe the method and location(s) you wish to conduct business: _____

Section 6 – Signatures Required

I hereby certify that, to my knowledge, the above information is true and correct.

BUSINESS OWNER(S)

Business Owner's Signature: _____ Date: _____

Business Owner's Signature: _____ Date: _____

Section 7 – Review and Approval

Official Use Only:

Approved Denied Reason for Denial: _____

Date Issued: _____ Expiration Date: _____

Planning Official Signature: _____ Date: _____

