

Henderson County Parks & Recreation Department 708 SOUTH GROVE ST, HENDERSONVILLE, NC 28792 Phone: 828-697-4884 • Fax: 828-697-5599 •

www.hendersoncountync.org/recreation/vending

Mobile Food Vending Application – Jackson Park

BUSINESS INFORMATION				
Name of Company:				
Address:				
City:	State:		ZIP Cod	de:
Phone:	E-mail:			
Business Website:				
Business Facebook (or other):				
OWNER INFORMATION				
Name:	Phone:	A	lt Phone	:
Name:	Phone: Alt		It Phone:	
Requested Dates (attached additional pages for more detailed schedule)				
Weekend Dates (Sat and Sun):			Time:	
Weekday Dates (Monday through Friday): Til		Tim	Time:	
DECLIDED DOCUMENTO TO CURNATI MITH APPLICATION				
REQUIRED DOCUMENTS TO SUBMIT WITH APPLICATION				
Henderson County Health Department Permit				
http://www.hendersoncountync.org/health/web_pages/environmental_health/environmental_health.html				
☐ Multiple photographs of interior and exterior of mobile vending unit; include dimensions of unit				
☐ Proposed menu with prices for each item				
☐ Type of packaging that will be used to serve food in				
☐ At least 3 strong references: provide name, relation, phone number and email				
*If selected, you will have two weeks to submit a valid certificate of insurance for a one-million dollar Commercial General Liability policy listing Henderson County, its officers, employees and volunteers, as additional insured. (Confirm that the wording on the insurance certificate matches the bolded statement exactly).				
PAYMENT INFORMATION - \$100 APPLICATION FEE - GOOD FOR ONE CALENDAR YEAR (JAN-DEC)				
The user hereby agrees to indemnify and hold harmless Henderson County, their officers, agents, all employees, and volunteers from any and all claims for bodily injury, and personal injury, and/or property damage, including cost of investigation, all expenses of litigation, including reasonable attorney fees, and the cost of appeals arising out of any claims or suits which result from errors, omissions, or negligent acts of the user, his agents or employees. Group is responsible for abiding by all HC policies, rules and regulations.				
Payment Method: Check □ Visa □ MasterCard □				
·			Expirat	ion Date:
Applicant Signature:				Date: