

City of Buda

Mobile Vendor Permit Application

405 E. Loop Street, Building 100, Buda, Texas 78610
512-312-5745

Application for (check one box only): Mobile Food Vendor – Hot
 Mobile Food Vendor – Cold

Mobile Vendor Name: _____

Mobile Vendor Owner's Name: _____ **Phone:** _____

Additional Responsible Party (if applicable): _____ Phone: _____

Owner's Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Personal Identification Number/State: _____

Email Address: _____ Number of Employees: _____

Unit Type: Motor Vehicle Trailer Motor Vehicle with Trailer Other: _____

Vehicle Make: _____ Model: _____ Year: _____

Color: _____ License Plate No.: _____ VIN No.: _____

Name of Commissary Facility Servicing Vendor: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Owner/Responsible Party's Name: _____

Types of Retail/Food to be Offered: _____

All of the information contained in this application is true and correct to the best of the applicant's knowledge and belief. Applicant acknowledges that the permit applied for shall be subject to all provisions of the orders and ordinances of Hays County and the City of Buda under which the permit is granted, and shall be subject to all provisions of the statutes and ruled adopted under the statutes of the State of Texas governing food service establishments, retail and food stores, mobile food units and roadside food vendors.

Owner/Responsible Party Signature

Printed Name

Date

City of Buda

Mobile Vendor Permit Application Checklist

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In addition to the application form, Mobile Vendors must submit the following materials outlined below at the time of permitting.

- Valid Personal Identification (ID) Card:** A current and valid personal identification card, such as a drivers license, must be provided for all owners and responsible party personnel assigned to the mobile vending permit.
- Proof of Texas Sales and Use Tax Permit:** A copy of the vendor's current and valid Texas Sales and Use Tax Permit must be provided. The provided permit must be registered under the mobile vending unit owner's name or under the business name of the mobile vending operation. The application for this tax permit is available at: <http://www.window.state.tx.us/taxpermit>. The physical location of this permitting office is located at: 1711 San Jacinto Blvd, Suite 180, Austin, TX 78701. For additional questions, call 1-800-252-5555.
- Proof of Applicable Hays County Health Permit:** A copy of the vendor's current Hays County Consumer Health Permit must be provided. The provided permit must be registered under the mobile vending unit owner's name or under the business name of the mobile vending operation. For questions about consumer health permits, please contact Hays County Development Services at 512-393-2150.
- Proof of current state vehicle registration & insurance**
- Proof that the Mobile Vendor Unit is commercially designed or a layout plan for the unit if not commercially designed.**
- All employees of the permit holder must have valid food handler's training certificates and available for inspection (copies do not have to be provided).**
- Site Plan for any locations where the mobile food vendor will be in operation for more than one (1) hour with denoted location of mobile food vendor clearly marked.**
- Mobile Vendor Itinerary Sheet indicating locations where the mobile vendor will operate for more than one (1) hour as well as commissary servicing schedule.**
- Commissary Facility Permission for Use Verification Form - NOTARIZED**
- Restroom Agreement**

City of Buda
Commissary Facility Permission for Use Verification Form

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This form serves to verify that the owner/responsible party of the Commissary Facility submitted for use has granted permission to the mobile vendor to utilize the Commissary Facility. By providing approval of use for the Commissary Facility the owner/operator agrees to provide the following criteria which are required to be utilized as a Commissary Facility with the City of Buda/Hays County Mobile Vending Program:

- Maintain a current and valid food establishment permit.
- Provide adequate and approved waste disposal facilities for handling waste water disposal, oil/grease disposal, trash disposal, and all other necessary waste disposal.
- Provide an approved sanitary process for providing fresh water to mobile units.
- Allow the mobile vendor to bring the unit to the establishment for servicing as needed.
- Provide sanitary food storage facilities for dry goods and items requiring temperature control.
- Allow foods to be held/stored overnight at Commissary Facility under approved sanitary conditions.
- Provide storage for equipment and supplies used by mobile vendor while not on mobile unit.

The Commissary Facility owner must provide a valid Food Manufacturer’s license issued by the Texas Department of State Health Services if the Commissary Facility owner provides any potentially-hazardous-foods to a mobile vendor for sale or dispersal from the mobile unit.

I _____ have read and understand the items of responsibility listed above
Commissary Facility Owner or Responsible Party

and agree to comply with all of the requirements. I give permission to _____
Mobile Vending Unit Owner

of _____ to use my establishment, _____
Mobile Vending Unit Name Name of Establishment

located at _____ as a Commissary Facility for the mobile vending unit.
Address of Establishment

Owner/Responsible Party Signature Printed Name Date

Notary Verification

Before me on this day, _____, personally appeared _____,
Date Facility Owner or Responsible Party

Owner or responsible party of _____, know to me (or proven to me) to be the person whose
Name of Facility Establishment

name is subscribed to the above “Central Preparation Facility Permission for use verification Form.”

Name of Notary Public, State of Texas (Print) Notary’s Signature

Notary Seal My Commission Expires: _____, 20 _____

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Mobile Vendor Itinerary Sheet

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All City of Buda Mobile Food Vendors are required to submit and maintain a current itinerary sheet detailing all vending locations the vendor will be at for more than one hour & hours of operation at these locations, and Central Preparation Facility (CPF) service visits. If any changes are to be made regarding the itinerary on file (i.e. changes to vending locations, times, or CPF visits) then an updated itinerary must be submitted to the City prior to enactment of the changes. Failure to maintain a current and valid itinerary with this department may result in permit suspension and/or legal charges being filed.

Mobile Vending Unit Name (print): _____

Owner's Name (print): _____

Owner's Contact Phone Number: _____

Itinerary Valid for the Following Calendar Quarter (check ONLY one):

- January 1 - March 31
 April 1 – June 30
 July 1 – September 30
 October 1 - December 31

Vending Location Address	Days at This Location (Circle all that Apply)	Start Time	Stop Time
	Sun Mon Tue Wed Thu Fri Sat		
	Sun Mon Tue Wed Thu Fri Sat		
	Sun Mon Tue Wed Thu Fri Sat		
Commissary Facility Service Visit	Sun Mon Tue Wed Thu Fri Sat		
Commissary Facility Service Visit	Sun Mon Tue Wed Thu Fri Sat		

(Please submit additional itinerary pages if needed)

Owner/Responsible Party Signature

Printed Name

Date

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Mobile Vendor Restroom Facility Agreement

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All City of Buda mobile vendors operating at a location for duration of one (1) hour or more must provide this Restroom Facility Agreement form confirming the availability of a restroom for use within 150 feet of the vending location during the hours of operation. A valid Restroom Facility Agreement must be on file for each individual location a vendor operates at for one (1) or more hours. Failure to maintain a valid and accurate Restroom Facility Agreement form may result in permit suspension and/or possible legal charges being filed against the Mobile Vending Permit holder.

Vendors utilizing fixed establishment's restroom facilities must this form filled out and signed by the owner/responsible party of the facility intended for use. Residential restroom facilities may not be utilized for this requirement.

I, _____, owner/responsible party for _____
Name of Business Owner/Responsible Party Name of Business

located at _____, give permission to _____
Business Address Name of Mobile Owner/Responsible Party

of _____ to use my restroom facilities for their employees customers
Name of Mobile Vending Unit Check All Applicable Circles

during the mobile unit's hours of operation. **I understand that observations of inaccessibility to my restroom facilities during the mobile food vendor's hours of operation, restroom facilities greater than 150 feet from mobile unit or sewage violations may result in this agreement being rescinded by the City of Buda and/or Hays County.**

Mobile Unit Owner/Responsible Party Signature

Mobile Unit Owner/Responsible Party Printed Name

Date

Business Owner/Responsible Party Signature

Business Owner/Responsible Party Printed Name

Date

Business Owner/Responsible Party Phone

Business Owner/Responsible Party Email