

File No.:	
Date Submitted by Applicant:	
Date Deemed Complete:	·

400 Main Street Cottage Grove, OR 97424

TEMPORARY FOOD CART PERMIT APPLICATION

To: City of Cottage Grove Community Development Department

Applicant			
Name:	Phone No.:		
Mailing Address:	failing Address:		
Status: Owner	Agent		
Note: If agent you must have owner's const	ent and signature.		
Owner (if not applicant)			
Owner's Name:	Phone No.:		
Owner's Mailing Address:			
Location(s) of Commercial Property Where	Food Cart Will Be Operated		
Address(s)/Location(s):			
Present Use:			
Request for Consideration			
Is this application filed in association with other land use permit applications?			
Yes	☐ No		
Reasons for Application:			
Required Information			
Narrative Statement: This application must be filed with one copy of a narrative			
statement that explains how the application	satisfies each and all of the relevant criteria		
	•		
	Status: Owner Note: If agent you must have owner's consection Owner (if not applicant) Owner's Name: Owner's Mailing Address: Location(s) of Commercial Property Where Address(s)/Location(s): Present Use: Present Use: Yes Request for Consideration Is this application filed in association with owner yes Reasons for Application: Required Information		

	requirements for each approval, e.g., Cha Divisions), 4.6 (Modifications), 4.8 (Coo Permits), and 5.2 (Non-Conforming Use	apters 4.2 (Land Use Review), 4.3 (Land le Interpretations), 4.9 (Miscellaneous		
	Plans: Provide a separate site plan and photo(s) f	lans: Provide a separate site plan and photo(s) for location(s) and signage.		
	Permission(s): Proof of the commercial proper food cart on his/her property.	s): Proof of the commercial property-owner's permission to place the n his/her property.		
	Food Unit license requirements, as enforced	e food cart complies with applicable Oregon Health Authority Mobile license requirements, as enforced by the Lane County Health t. License # Class:		
	Non-refundable application fee.			
G.	Signature			
either (eby request a Temporary Food Cart Permit on the abrowned by or granted permissions to the applicant, e, Oregon.	* * ·		
require and all 30 day you eit inform some o writter	beby acknowledge that this application is not considered information has been submitted as determined built required fees have been paid in full. Once the originary to determine whether an application is complete. Either deeming the application complete or requesting mation is requested you have 150 days to either: substantially of the information and written notice that no other in notice that none of the missing information will be ded complete, staff will have 120 days to complete the 178)	y the Community Development Director ginal application is submitted, Staff has Within 30 days a letter will be mailed to g additional information. If additional omit the missing information, submit information will be provided, or submit a be provided. Once your application is		
	Owner:	Agent:		
Signat	ature:			
Name:	e:			
Date:				
	Office Use Only	<u>Y</u>		
Date A	Application Received: Initials:			
Date A	Application Complete: Initials:			
Applic	icant Notified of Completeness:			
Fee Pa	Paid:Receipt No Initials:			