

Food Truck Vendor's License

Application

Revised 11.20.2023

1. BUSINESS INFORMATION									
Trade Name (dba):				Website:					
Legal Name:									
Business Address /Business Location:				City:			State:	Zip:	
Mailing Address:				Phone Number:					
Commercial Insurance Carrier:				Expiration Date:					
Sales & Use Tax ID Numbers (Caddo/Shreveport):				Sales & Use Tax ID Numbers (Louisiana):					
2. APPLICANT PRIMARY CONTACT INFORMATION									
Applicant's Name:									
Applicant's Address:				City:	State: Zip:				
Email:				Phone Number:					
3. VEHICLE AND/OR TRAILER INFORMATION									
Vehicle Type: Self-Propelled Sth Wheel Tow Bumper Tow Other (please specify)									
Vehicle/Trailer Make:	Vehicle/Trailer Model:			Vehicle/Trailer Year:					
Vehicle Length:	Vehicle Width:			Vehicle Height:			Number of Axels		
Will propane (LPG) tanks be used?	es □ No If yes, how many tanks?				Tank Size:				
Will Generator be used? ☐ Yes ☐ No	Is Cooking Hood System installed?			🗆 Yes 🗆 No	No What type(s) of fuel does appliance(s) use? Electric Gas				
What type of appliance(s) will be used? Deep Fryer Griddle Stove Other (Describe):									
Name of Person or Entity Listed on Vehicle Registration:									
Vehicle Registration Number:			Expiration Date:			Lic	License Plate:		
VIN:			1						
Vehicle Insurance Carrier:			Policy Number:			Ex	Expiration Date:		
4. ACKNOWLEDGEMENTS									
I certify that the above information is true and correct to the best of my knowledge. I understand that the Office of the Metropolitan Planning Commission or the City of Shreveport is authorized to suspend or revoke a Food Truck Vendor's License issued under the provisions of its Unified Development or City Code wherever a permit or license is issued in error or on the basis of incorrect, inaccurate or any false statement or misrepresentation, or in violation of any ordinance or regulation or any of the provisions of the City of Shreveport Unified Development, the Shreveport City Code, the International Building Code or International Fire Code as adopted by the City of Shreveport. Fines and penalties for misrepresentation of material facts will be assessed in accordance with City of Shreveport ordinances and State of Louisiana Revised Statutes. I understand that I must report any change in business ownership, operation, and/or address immediately.									
Signature:							Date:		



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HOLD HARMLESS AGREEMENT CITY OF SHREVEPORT FOOD TRUCK VENDOR'S LICENSE

WHEREAS, the undersigned has made application for a Food Truck Vendor's License in the City of Shreveport,

NOW, THEREFORE, in consideration of the privileges and license granted by the City of Shreveport the undersigned hereby agrees to indemnify and hold harmless the City of Shreveport, its elected officials, officers, employees, and agents from and against any and all claims, demands, suits, judgements, and sums of money to any party accruing against the City of Shreveport, its elected officials, officers, employees and agents for loss of life or injury or damage to persons or property arising out of or in connection with the operations or licensing of the undersigned.

This agreement executed this _____ day of _____, 20____,

FOOD TRUCK VENDORS:

Signature:



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OWNER'S AUTHORIZATION LETTER

Food Trucks: Please use this form for all private properties to which you plan on conducting business.

To the Office of the Metropolitan Planning Commission:

I/we, the undersigned, hereby certify that I/we am/are the owner(s) of the above described property and have given the consent to

_, its employees, or agents to use my property located at

____ in the City of Shreveport, Louisiana exclusively for the

purpose to set up and operate a food truck/trailer on my/our property. Consent is revocable in the event the property is sold, under new management or the user fails to meet any agreed upon terms or conditions.

This agreement executed this _____ day of _____, 20____.

1. FOOD TRUCK AND TRAILER INFORMATION						
Name of Mobile Food Truck Using Property:						
Contact Name:	Phone:					
Signature:						
2. PROPERTY OWNER/MANAGER INFORMATION						
Property Owner's Name:						
Address:	Phone:					