

COUNTY OF ALBEMARLE

Application for Zoning Clearance for MOBILE FOOD VENDOR

Zoning clearance fee = \$54

- Mobile Food Vendor checklist (page 2 of application)
- Certification that notice of this application has been provided to the property owner, if owner is different from applicant. (page 4)



Business Name _____

Business Address _____

Tax map and parcel _____

Address Where Mobile Food Unit is Stored When Not in Operation ?

Vending Location & Days/ Hours of Operation
(please list separately for each location within Albemarle County)

Applicant (who should we contact about this project): _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Email _____

Owner of Record _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Email _____

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PLEASE CHECK EACH BOX SO THAT IT IS CLEAR THAT YOU HAVE READ AND UNDERSTAND THE REQUIREMENTS FOR MOBILE FOOD VENDORS:

For additional details and contact information, please refer to the Albemarle County Mobile Food Vendors FAQs.

- Health Department Approval.** Each mobile food vendor shall provide a copy of a valid Mobile Food Establishment Permit issued by the Virginia Department of Health. No zoning clearance will be issued without prior approval from the health department.

Permit Expiration Date: _____

- Owner's Permission.** Operation of a mobile vending unit on private property for any length of time requires permission from the property owner.

- Verification of Site Plan Compliance.** Mobile food vendors may operate by right in any commercial zoning district. Operation at a single location for more than two hours at a time is subject to compliance with a site plan. Mobile food units must be no closer than 30 feet from any public right-of-way and 50 feet from any residential or Rural Areas zoning district.

- Commissary Facility.** State regulations require that food sold from a mobile unit must be prepared and stored either onboard the unit or in a health department permitted commissary facility. Food may not be prepared or stored in a home kitchen.

- Parking.** Each vending site shall provide a minimum of two parking spaces.

- Peddler's License.** Mobile food vendors who operate in Albemarle County are required to obtain a peddler's license.

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Owner/Applicant Must Read and Sign

I hereby apply for approval to operate as a Mobile Food Vendor in Albemarle County, and certify that the address information provided on this application is correct. I also certify that I have read the restrictions on Home Occupations, that I understand them, and that I will abide by them. This certificate represents zoning approval to conduct the vending activity identified above.

Signature of Owner or Applicant

Date

Printed Name

Daytime phone number of Signatory

APPROVALS

Other Official _____

Date _____

Zoning Official _____

Date _____

CONDITIONS:

FOR OFFICE USE ONLY	CLE # _____	Fee Amount \$ _____	Date Paid _____
By who? _____	Receipt # _____	Ck# _____	By: _____

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CERTIFICATION THAT NOTICE OF THE APPLICATION HAS BEEN PROVIDED TO THE LANDOWNER

This form must accompany zoning applications (Home Occupation, Zoning Clearance, Zoning Administrator Determinations or Appeals, Sign Permits, Building Permits) if the applicant is not the owner.

I certify that notice of the application, _____
[County application name and number]

was provided to _____ the owner of record of Tax Map
[name(s) of the record owners of the parcel]

and Parcel Number _____ by delivering a copy of the application in the manner
identified below:

_____ Hand delivering a copy of the application to _____
[Name of the record owner if the record owner is a person; if
the owner of record is an entity, identify the recipient of the record and the recipient's title or office for that
entity]

on _____
Date

_____ Mailing a copy of the application to _____
[Name of the record owner if the record owner is a person; if the own-
er of record is an entity, identify the recipient of the record and the recipient's title or office for that entity]

on _____ to the following address:
Date

[address; written notice mailed to the owner at the last known address of the owner as shown on the cur-
rent real estate tax assessment books or current real estate tax assessment records satisfies this require-
ment].

Signature of Applicant

Print Applicant Name

Date