

Accessory Mobile Food Establishment Certificate of Occupancy (CO)

Walk In Application Only

(Do Not Fax, Mail or Email application)

101 W. Abram Street, 2nd Floor – CD&P Dept; Ph. (817) 459-6502



- Only existing businesses with a valid CO for Restaurant, Bar, Microbrewery, Microdistillery or Winery and Theatre are eligible to apply for an Accessory Mobile Food Establishment CO.
- Accessory Mobile Food Establishment COs are nontransferable and shall become null and void should the existing business change ownership or close.
- Tenant/business owner shall be responsible to verify that any Mobile Food Establishments operating under the terms of the Accessory CO, has a valid Mobile Food Establishment Permit from the City of Arlington Health Division.
- Tenant/business owner shall maintain documentation of all Mobile Food operations that occur on site for a minimum of 90 days.

Please **print** clearly:

CO Location Address: _____ **Suite:** _____

Business Name (from existing CO): _____

Mailing address, if different from location: _____

Business Phone #: (____) _____ Fax #: (____) _____

Existing Tenant (**individual-not company**) Name*: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home/Cell Phone #: (____) _____ Work Phone #: (____) _____ Fax #: (____) _____

Email*: _____

***A copy of a current government photo ID is required to be submitted for the tenant and applicant.**

***A Certificate of Occupancy will be delivered to the Email provided above (Please verify email).**

NOTE: If the applicant is a different person than the tenant, then the following section must be completed by the applicant:

Applicant's (**individual-not company**) Name*: _____

Applicant's Mailing Address*: _____

City: _____ State: _____ Zip Code: _____

Home/Cell Phone #: (____) _____ Work Phone #: (____) _____ Fax #: (____) _____

Email: _____

Please check only one:

New Application

Revision to existing Accessory CO

Please check only one:

There is an Active Electrical Permit for this location. (Staff insert, EP # _____)

There is not an Active Electrical Permit for this location.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local ordinances regulating construction, the performance of construction or the use of any land or buildings.

All application fees for Certificate of Occupancy are non-refundable. The application review will not begin until all fees have been paid, addresses verified, and the correct number and types of plans, if any, are received.

Signature of Permit Applicant _____ DATE _____

Applicant is ___ Tenant or _____ Authorized Agent

Please answer all the questions on the following page. Incomplete applications will not be accepted.

Please submit a Site Plan, with the following information:

- Include contact information: name, address, telephone number and email and/or fax
- Indicate north point, graphic scale, title block, and consecutive sheet numbers at lower right corner
- Show building outline, sidewalks connecting to the building, landscaped areas, and proposed location and number of mobile food establishments
- Location, dimensions and number of all vehicular and pedestrian circulation elements, including parking stalls, ADA accessible spaces, loading spaces, sidewalks, walkways, including type of surface material, and fire lane
- Show parking compliance with off-street parking standards, in a table form
- Location and details of RV electrical connection (extension cords and generators are prohibited)

FOR STAFF USE ONLY:

Planner: _____ **Date:** _____ **Application Review Completed?** Yes No
Existing Zoning Use: _____ **Zoning District:** _____ **Zoning Overlay:** _____
Is this Use Allowed at this location? Yes No

Plans Examiner: _____ **Date:** _____ **Application Review Completed?** Yes No