



FRANKLIN PARK  
BOROUGH

**APPLICATION FOR FOOD TRUCK LICENSE**

2344 West Ingomar Road  
Pittsburgh, PA 15237  
412-364-4115

Complete this application in ink and print legibly. If additional space is required to answer some of the items below, use another sheet of paper and attach it to this application. All Statements are subject to verification, and incorrect statements will bar you from obtaining a license or will constitute grounds for later cancellation of the license. **It is required that you submit two (2) clear color photographs (1"x 1" head & shoulder view), a Photo ID, an original criminal record, Allegheny County Health Department permit, Hold Harmless Agreement, and proof of insurance (vehicle, public liability, food products liability, property damage, and Workers' Compensation)\*Insurance shall provide coverage for bodily injury for each person, for each occurrence and for property damage per occurrence and shall name the Borough of Franklin Park as additional insured.\***

**FOOD TRUCK INFORMATION:**

1. Company Name/Employer: \_\_\_\_\_
2. Company/Employer Address: \_\_\_\_\_  
\_\_\_\_\_
3. Name of Owner: \_\_\_\_\_
4. Owner Phone Number: \_\_\_\_\_
5. Owner Email Address: \_\_\_\_\_
6. Type of food to be sold: \_\_\_\_\_
7. Specify the days and hours when business will be conducted.  
 Dates: From: \_\_\_\_\_ to: \_\_\_\_\_  
 Hours: From: \_\_\_\_\_ to: \_\_\_\_\_
8. Applicant's Driver's License: State \_\_\_\_\_ Number \_\_\_\_\_ Expiration \_\_\_\_\_
9. Information regarding the vehicle you will be using while in the Borough:  
 Year/Make/Model: \_\_\_\_\_  
 Registered in the State of: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

**APPLICANT'S INFORMATION**

10. Applicant's Name: \_\_\_\_\_
11. Applicant's Permanent Address: \_\_\_\_\_  
\_\_\_\_\_
12. Applicant's Local Address (if different): \_\_\_\_\_  
\_\_\_\_\_

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13. Applicant Phone #: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

14. Applicant's Email Address: \_\_\_\_\_

15. Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

16. Male/Female \_\_\_\_\_ Weight \_\_\_\_\_ Height in ft \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_

17. Are you a United States Citizen? \_\_\_\_\_

18. Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**I certify that there are no willful misrepresentations in or falsifications of the above statements and answers to questions.**

**I am aware that any falsehoods or misrepresentations will bar me from obtaining a permit or constitute grounds for later cancellation of the permit.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\*\*\*\*\*

**OFFICE USE ONLY:** License number \_\_\_\_\_

Date License Issued: \_\_\_\_\_

Date License Expires: \_\_\_\_\_

**FRANKLIN PARK BOROUGH  
HOLD HARMLESS AGREEMENT**

Licensee shall hold harmless the Borough of Franklin Park, its officers, officials, agents, and employees and shall indemnify and defend the Borough of Franklin Park, its officers, officials, agents, and employees for any claims of damage to property or injury to persons, which may be occasioned by any activity carried on under the terms of the Food Truck License.

\_\_\_\_\_  
Licensee Print Company Name

\_\_\_\_\_  
Licensee Print Name

\_\_\_\_\_  
Licensee Signature

\_\_\_\_\_  
Date