



Food Truck

Registration

Business Information

Company Name:
Truck/Trailer Size:
Address:
Phone:
Email:
Website:
Dates of Operation (not to exceed 15 days/calendar year):

Contact Information

Name:
Phone (if different than above):
Address (if different than above):
Email (if different than above):

Documents Required

- Copy of Minnesota Department of Health permit
- Certificate of liability insurance
- Written approval from property owner
- Site plan that includes location of where the food truck will be setup.

Submit this form, fees, and all required documents to:

CITY OF BAUDETTE
PO BOX 548
BAUDETTE, MN 56623
218-634-1850



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Indemnification Agreement

The undersigned covenants and agrees to hold harmless and indemnify the City of Baudette, a Minnesota Municipal Corporation, and its representatives from any and all claims, demands, actions, lawsuits, proceedings, liabilities, attorney’s fees, losses, costs, and expenses, (collectively referred to as “claims”) of any nature, brought by whomever, arising or alleged to arise from the use, operation, and maintenance of its food truck, regardless of any fault, liability, or negligence of the City of Baudette, or any of its representatives.

Initial _____

I, the undersigned, hereby agree to comply with the City of Baudette requirements pertaining to food trucks/trailers .

Initial _____

I hereby certify that the information provided herein is true and correct to the best of my knowledge and belief, and the City of Baudette may rely on the accuracy of such information provided in determining whether or not a license should be issued.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF CO-APPLICANT

DATE



FOR OFFICE USE ONLY

DATE RECEIVED _____

TOTAL FEE RECEIVED _____

DATE OF ISSUANCE: _____



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SIGNATURE: _____
Tina R Rennemo, Clerk/Treasurer