



CORPUS CHRISTI - NUECES COUNTY
PUBLIC HEALTH DISTRICT

Environmental & Consumer Health Services

1702 Horne Rd, Corpus Christi Tx 78416

Phone: 361-826-7222

Email: EandCHServices@corpuschristitx.gov

Mobile Food Vendor / Temporary Event Application

- 2 YEAR TEMPORARY EVENT NEW MOBILE FOOD TRUCK
 TEMPORARY EVENT (Single Event) Name Change Billing Information Change

BUSINESS INFORMATION

Business Name: _____
Address: _____ Suite: _____
City: _____ State: _____ Zipcode: _____
Office Phone: _____ Company email: _____

BILLING/INVOICING INFORMATION Billing information is the same as the Business name

Owner Name: _____
Address: _____ Suite: _____
City: _____ State: _____ Zip code: _____
Office Phone: _____ Company email: _____

TEMPORARY EVENT LOCATION

Temp Event Name : _____
Location : _____ Cell #: _____
Date: _____ Contact Name: _____
Time: _____ Event Cordinator: _____

PERMITS & FEES

- | | |
|---|-------|
| <input type="checkbox"/> Mobile Food Unit-Health Permit | \$250 |
| <input type="checkbox"/> Farmers Market Permit | \$50 |
| <input type="checkbox"/> Temporary Event - Single Event up to 14 Consecutive days | \$52 |
| <input type="checkbox"/> Temporary Event - Multiple Events for 2 Years | \$200 |
| <input type="checkbox"/> Permit Amendment | \$125 |

I SWEAR OR AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. I FURTHER CERTIFY BY SIGNATURE HEREON, THAT I AM AUTHORIZED TO EXECUTE THIS DOCUMENT AND I AM ELIGIBLE TO RECEIVE A LICENCE

SIGNATURE: _____

PRINTED NAME & TITLE _____

DATE: _____

INTERNAL USE ONLY

Check #	Amount Paid:	Infor#	Hub#
Processed By:		Date:	
Office Hours: Monday - Friday 8am to 5 pm			
Cashier Hours: Monday - Friday Between 8am to 4pm for payments.			