

VILLAGE OF GOODRICH  
FOOD TRUCK/VENDOR PERMIT APPLICATION

Date requested: \_\_\_\_\_

Event Date(s) \_\_\_\_\_

Event Name (if applicable) \_\_\_\_\_

Main Contact: \_\_\_\_\_ Phone \_\_\_\_\_

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

Zip Code: \_\_\_\_\_

Event Website/Facebook \_\_\_\_\_

Event Location: \_\_\_\_\_

Will roads need to be closed for this event? \_\_\_\_\_ Yes \_\_\_\_\_ No

Be sure to review the Village of Goodrich Food Truck Ordinance for information on hours of operation, parking, signage, etc.

All Licenses, Certifications, Proof of Insurance, including your LOI provided to Genesee County, must be submitted with this application, or via email to: [swilkerson@villageofgoodrich.com](mailto:swilkerson@villageofgoodrich.com).

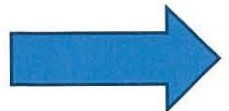
**Applicant Checklist (copies to be provided with application)**

- \_\_\_\_\_ Insurance Certificate
- \_\_\_\_\_ Health Department Certificate
- \_\_\_\_\_ Letter of Intent
- \_\_\_\_\_ Certification of Fire Extinguisher/Suppression
- \_\_\_\_\_ Proof of notification to Village Fire Chief of event
- \_\_\_\_\_ Michigan Special Transitory Food Unit or Mobil License
- \_\_\_\_\_ Hold Harmless Certificate (attached)
- \_\_\_\_\_ Form and \$25 fee submitted at least 2 weeks prior to event (\$25 fee begins 1/1/2024)

\_\_\_\_\_ Truck\_\_ Trailer\_\_ Table\_\_ Booth\_\_

Name of Vendor/Food Truck

Complete Menu and/or list of items being sold (Please attach)



By signing below, I/we, the Vendor/Main Contact, agree that this truck/trailer will have proper water supply, power supply and waste water disposal in accordance with the Village of Goodrich Ordinances. Vendor will have their Intent to Operate sent to the Genesee County Health Department (GCHD) prior to the event, and will have valid GCHD insurance present during the event. I/we understand that the \$25.00 Truck/Trailer permit fee IS NON-REFUNDABLE. I/we agree to have all required vendor Michigan Special Transitory Food Unit or Mobil Licenses readily available on each day of the event to be presented if requested. This permit is due with payment at least two weeks prior to event.

Signature of applicant (main contact) \_\_\_\_\_

Date: \_\_\_\_\_

Note: Applicant Checklist must be complete prior to authorization.

Signature of authorization:

\_\_\_\_\_  
Sheri Wilkerson, CMC, Village Administrator  
VILLAGE OF GOODRICH  
7338 S. STATE ROAD (PHYSICAL ADDRESS)  
PO BOX 276 (MAILING ADDRESS)  
GOODRICH, MI 48438  
(810) 636-2570 Ext 101

\_\_\_\_\_  
Date

## HOLD HARMLESS AGREEMENT

The \_\_\_\_\_ hereby agrees to indemnify, defend, save and hold harmless the Village of Goodrich, its council members, directors, agents, employees and representatives against any and all loss, claims, or suits (including costs and attorney fees), which the Village of Goodrich may hereafter incur, be responsible for or pay out, as a result of bodily injury (including death) to any person or damage to any property or any person, that may arise from the negligent acts or omissions of the \_\_\_\_\_ its officers, agents (including subcontractors), or employees in connection with the performance of their solicitations.

Upon the filing with the Village of Goodrich of a claim for damages arising out of an incident for which the \_\_\_\_\_ herein agrees to indemnify, defend, save and hold the Village of Goodrich harmless, the Village of Goodrich shall notify the \_\_\_\_\_ of such claim by first class mail sent to \_\_\_\_\_. Any final judgment rendered against the Village of Goodrich for any cause for which the \_\_\_\_\_ is liable hereunder shall be conclusive as to the liability and amount, provided the Village of Goodrich has notified the \_\_\_\_\_ of such a claim as provided above.

\_\_\_\_\_  
Signature of petitioner and date

\_\_\_\_\_  
Sheri Wilkerson, Administrator/Clerk