

CITY OF CREEDMOOR
5008 HARTUNG LN.
CREEDMOOR, TEXAS 78610
Tel:(512)243-6700 Fax:(512-243-6701)

Permit# _____

MAYOR Fran Klestinec
COUNCIL MEMBERS
Jesse Solis, Mayor Pro Tem
John Gray
Jeff Jakobeit
Sabrina Nelson
Jacob Wilhite

Robert Wilhite, City Administrator

DATE: _____

MOBILE/MODULAR FOOD VENDOR PERMIT APPLICATION

Instructions: Please fill out completely. If more space is needed, use additional sheet(s). If submitted by other owner, attach written authorization from owner.

Location/Address: _____

Owner: _____

Mailing Address: _____

Phone#: _____

Email: _____

Issued to: _____

Address: _____

Zoning District: _____

Legal Description: _____

Property to be used for: _____

This certifies that the Building Permit herein described complies with the provisions of Zoning Ordinance No. 040916-A of the City of Creedmoor, Texas. Failure to comply with the use indicated may nullify the said permit. Any change/addition to the building/structure other than those described above will require another permit.

There is a **TWO-YEAR PERIOD in which to complete this Building Permit Project** starting from this date.

Attach: A Site Plan and a certified list of the names and addresses of all property owners within 600 feet of the property for which the building permit is requested.

Filing Fee: Per attached schedule. Fees assessed at the time this application is submitted.

***NOTE:** There will be a \$85.00 fee for each failed inspection.

Please make check payable to City of Creedmoor.

Mail or bring application (along with the filing fee) to the City of Creedmoor Office. Credit card payments are accepted by phone, contact the city (512-243-6700).

Mailing Address:

City of Creedmoor
5008 Hartung L.
Creedmoor, Texas 78610

Physical Address:

City of Creedmoor
12513 FM 1327
Creedmoor, Texas 78610

OFFICIAL USE ONLY

Approved _____ Approved/Disapproved by Creedmoor City Council _____ Date: _____

Disapproved _____

Fee Amount: _____ Accepted By: _____

Signature of City Administrator _____ Date: _____

Signature of Owner/Authorized Agent _____ Date: _____