

205 NORTH LIMESTONE STREET
GAFFNEY, SOUTH CAROLINA 29340



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JAMES V. CAGGIANO, JR.
FIRE CHIEF

**Mobile Food Preparation Vehicle
Permit Application**

Business Information:

Name of Business: _____

Name(s) of Owner(s): _____

Business Physical Address: _____

Business Mailing Address: _____

Business Email: _____

Business Phone: _____ Mobile: _____

Vehicle Information:

_____ Food Truck _____ Food Trailer

Vehicle Make: _____ Model: _____ Year: _____ Tag Number : _____

Rules and Regulations:

1. All mobile food preparation vehicles are required to obtain a Business License and Permit prior to commencing business within the City Limits of Gaffney.
2. This permit is good for 30 days from the issue date, unless notified in writing by the City of Gaffney.
3. Vehicles with proper licensing and permits are still subject to random fire inspections. Violations could result in the revocation of the permit and/or fines.
4. Once the permit has expired, it is up to the owner or designee to schedule a re-inspection with the Fire Marshal.

_____ **Permit Approved**

_____ **Permit Denied**

Inspector Signature: _____ Date: _____