

Food

Truck



On February 26, 2024, Mayor and City Council approved the Food Trucks/Vending ordinance.

A Food Truck is a business based in a motor vehicle or trailer with a mobile or full-service kitchen which temporarily establishes itself on an existing property to sell prepared, prepackaged, or cooked food on-site. Vending/Food cart means a pushcart which is designed to be readily movable from which food items are dispensed. Applicants must submit applications via the [Citizenserve Online Portal](#) and meet all state and local regulations regarding food service and preparation.

The review process is 30 days and begins after the date of acknowledged acceptance by city staff. Applicants are encouraged to submit application 90 days prior to a Special Event.

HOLD HARMLESS AND INDEMNIFY

In making this request, the applicant understands that they will **HOLD HARMLESS AND INDEMNIFY** the City of Stonecrest, its officers, employees, and agents against injury, loss or damage occurring because of a food truck application. For additional information regarding this requirement, please contact the City of Stonecrest Planning and Zoning Department at 770-224-0200 or planning-zoning@stonecrestga.gov.

APPLICATION CHECKLIST*

Incomplete applications will not be accepted for processing and will be returned to the applicant. Please complete all sections legibly.

✓	Item
	Pre-Application Meeting
	Application
	Letter of Intent (<i>including all applicable addresses, months at each location, specific days of the week at each location and hours of operations at each location</i>)
	Site Drawing (<i>including location of food truck on property/properties</i>)
	Property Owner(s) Notarized Certification
	Applicant(s) Notarized Certification
	School's Principal Approval Letter (if applicable)
	Copy of City of Stonecrest Business License
	Copy of DeKalb County Health Department Approval

Helpful Numbers

City of Stonecrest (Planning and Zoning)
(770) 224 – 0200

City of Stonecrest Revenue/Business License
(770) 224 – 0200

Dekalb County's Health Department
(404) 508 – 7903

CONTACT INFORMATION

Please provide the organization and/or individual responsible for the management of the food truck or food cart.

Name of Individual or Organization :	
Additional Contact(s):	
Address:	
Primary Contact Work Phone:	
Primary Contact Cell Phone:	
Primary Contact Email Address:	
Is this organization a commercial entity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have an active business license?	<input type="checkbox"/> Yes * <input type="checkbox"/> No <i>*If yes, please attach.</i>
Is this application a part of a Special Event in the city?	<input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*if yes, provide name and date of Special Event.</i>

×

Print Name of Applicant (Primary)

×

Date

×

Signature of Applicant

×

Date

Food Truck/Vending/Food Cart

All applications and plans must be submitted through the [Citizenserve Online Portal](#)



Property Owner(s) Notarized Certification

The owner of the below property acknowledges that this food truck/vending/food cart application is correct and complete. By completing this form, all owners of the subject property certify authorization of the filing of a food truck/vending/food cart application, and authorizes the applicant and/or agent to act on their behalf in the filing of the application, including all subsequent applications.

Property Owner			
Name:			
Address:	City, State:	Zip:	
Signature:	Date:		
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Additional Property Owner (if applicable)			
Name:			
Address:	City, State:	Zip:	
Signature:	Date:		
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Additional Property Owner (if applicable)			
Name:			
Address:	City, State:	Zip:	
Signature:	Date:		
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Food Truck/Vending/Food Cart

All applications and plans must be submitted through the [Citizenserve Online Portal](#)



Applicant(s) Notarized Certification

The applicant acknowledges that this food truck/vending/ food cart certification form is correct and complete. By completing this form, the applicant of the subject property certifies authorization of the filing of the application, and authorization of the applicant and/or agent to act on their behalf in the filing of the application and all subsequent applications.

Applicant			
Name:			
Address:	City, State:	Zip:	
Signature:		Date:	
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Applicant (if applicable)			
Name:			
Address:	City, State:	Zip:	
Signature:		Date:	
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Applicant (if applicable)			
Name:			
Address:	City, State:	Zip:	
Signature:		Date:	
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			