

Food Truck – Add a New License

Use this application if you

- are applying for both a Food Truck and a Restaurant/Community Kitchen or
- have a Restaurant license in Minneapolis and want to apply for a Food Truck license. You must have the same ownership and kitchen.

Use the [Food Truck Application](#) if you are applying only for a Food Truck or have different ownership/kitchen.

Food Truck Definition: Preparing and/or serving foods from a self-contained vehicle

- motorized or within a trailer
- which is movable, without disassembling, for transport
- on private property at a brewery, distillery, or park
- or curbside on public streets.

Food preparation and storage must occur at a commercial kitchen licensed in Minneapolis. Food cannot be prepared or stored at home. Vehicles may not be stored at home.

[Street locations](#) are available daily on a first-come first-served basis. There may be up to three vendors in parking lots located outside of downtown. You do not need another license/permit at any event (farmers markets, block events) but you must have written permission from the event organizer. These are reviewed and approved by the Minneapolis Health Department.

If you have questions, send an email to businesslicenses@minneapolismn.gov or call 612-673-2080.

1. Application Requirements

- | |
|---|
| <p>1. Complete the application and include all the requirements listed below. Incomplete applications may be returned.</p> |
| <p>2. There is a fee, plus a new license processing charge, for this application. You can pay by</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cash: Drop off your application at our office. <input type="checkbox"/> Check: Mail or drop off your application at our office. <input type="checkbox"/> Credit Card: Mail, drop off or email your application to businesslicenses@minneapolismn.gov. Do not add your credit card information on this application. We will call you to securely charge your credit card. |
| <p>3. <input type="checkbox"/> Attach a copy of your Restaurant/Community Kitchen Application or</p> <p><input type="checkbox"/> List your Minneapolis Food License Number: _____</p> |
| <p>4. <input type="checkbox"/> Menu: Attach a copy of the menu and/or list of food items for sale.</p> |
| <p>5. <input type="checkbox"/> Attach a diagram of your truck, using the attached list of Food Truck Vehicle Requirements (Form #1):</p> |
| <p>6. <input type="checkbox"/> Attach your Site Plan (Form #2) of Proposed Private Property Location. Plans that do not conform to the requirements will be returned. Food trucks are only allowed at a brewery, distillery, or a park.</p> <p><input type="checkbox"/> N/A. I am operating at street locations only.</p> |
| <p>7. Letter of Consent (Form #3) is required if the proposed location is:</p> <ul style="list-style-type: none"> <input type="checkbox"/> on private property parking lot. Written consent is required from the property owner. <input type="checkbox"/> within 200 feet of park board property. Written consent from the Minneapolis Park Board may include a permit, agreement, or other required written authorization. <input type="checkbox"/> within 100 feet, on the same block face, and has direct sidewalk access to a restaurant or sidewalk café. Written consent is required from the proprietor of the restaurant. <input type="checkbox"/> N/A. None of these apply. <p>Note: Maintain a copy of this consent in your food truck while operating.</p> |

8. **Hold Harmless Statement for Public Property (Form #4)**
 Attach a signed statement that the license holder shall hold harmless and indemnify the city, any applicable special service district, and their officers and employees, for any claims for damage to property or injury to persons which may be caused by any activity carried on under the terms of the license.
9. **Certificate of Liability Insurance (Form #5)** must be submitted after approval of your Site Plan and Vehicle Plan. This is required before a license will be granted. This must be furnished by your Insurance Agent. You are required to have public liability, food products liability and property damage insurance in the amount of \$1,000,000 per occurrence to protect license holder, property owners and the city from all claims for damage to property or bodily injury, including death, which may arise from operations.
10. Email a **Food Truck Plan Review Form** (Form #6) to development@minneapolismn.gov. There is a **fee** for this review. (Usually Risk 1/lowest square footage) If you have questions, call 612-673-3000 or email development@minneapolismn.gov. ***This is a separate review and we cannot approve your license until it is completed.***

2. Applicant Information

Legal Company Name		Business Name/DBA	
Name (Last, First, MI)		<input type="checkbox"/> Owner <input type="checkbox"/> Officer <input type="checkbox"/> Partner <input type="checkbox"/> Manager <input type="checkbox"/> _____	
Business Address		City	State
Mailing Address		City	Zip Code
Licensed Kitchen Address (Must be in Minneapolis)		City	Zip Code
Cell Phone Number		Business Telephone Number	
<u>Minnesota Sales Tax ID Number (Required)</u>		<u>Social Security Number or Individual Tax ID (Required)</u>	
Type of Ownership: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Non-Profit		E-mail Address	
<input type="checkbox"/> Adding a new license to an existing business (New License) <input type="checkbox"/> Adding a license to a new business (New License)			

3. Company Operations

Gross Square Footage for Business Use:	
Days and Hours of Operation:	
Give us a brief description of your business.	
No live entertainment such as radio, television, or electronically reproduced music contained within your vehicle. Music/noise cannot be amplified. Describe:	
Are you planning or have you completed any construction or remodeling? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Contractor or Building Manager
Does this include adding/changing equipment that requires a gas or plumbing connection? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Explain the scope of the remodeling or construction.	

4. Business Information

Street Locations Only. No operations will occur at parking lot locations.

Both Street and Parking Lot Locations. List your primary and secondary choices for parking lot sites. Food trucks are only allowed at a brewery, distillery, or park. This should not include information for community events.

Parking Lot Locations Only. List your primary and secondary choices for parking lot sites. Food trucks are only allowed at a brewery, distillery, or park. This should not include information for community events.

**Primary Parking Lot Vending Site
Address/Location/Description**

**Secondary Parking Lot Vending Site
Address/Location/Description**

Is your proposed location:

On a bus lane? Yes No

On or within 200 feet of park board property? Yes No

On a street where a restaurant or sidewalk café with direct access to the sidewalk/street is adjacent to/or within 100 feet, and on the same block face of this location? Yes No

5. Verification

The City of Minneapolis uses the information on this application to determine qualifications for a license. You are not legally required to provide this information. If you refuse, we cannot approve your application. After we approve your license, all information is public (MN Statutes, Chapter 13).

A signature is required.

I have read and agree to the [Terms and Conditions](#) for electronic signatures, records and payment.

I, (print name) _____, certify or declare under penalty of perjury under the laws of the State of Minnesota that the information on this application, checklist, and attached documents is true and correct. All information given is subject to verification by the State of Minnesota. I understand that false information may result in the denial, suspension or revocation of my business license.

By typing your name, you are electronically signing this application.

Signature of Applicant _____ Title _____ Date _____

Food Truck Vehicle Requirements

1. Vehicles must provide independent power supply which is screened from view. Generators are permitted. Indicate this in your specification and/or drawing.
2. The height of the food truck, including all accessory equipment, cannot exceed thirteen feet six inches (13' 6").
3. Vehicles may not have external signage, bollards, seating or any other equipment not contained within the vehicle. Signs must comply with [Zoning Code](#) requirements.
4. Vehicles may not maintain or use outside sound amplifying equipment, televisions or other similar visual entertainment devices, lights or noisemakers such as bells, horns or whistles.
5. Propane tanks must be attached to, or within, the food truck and the food truck must allow for adequate ventilation and screening of the tank.
6. The food truck shall meet all requirements needed to obtain licenses from the City of Minneapolis and the State of Minnesota.

Food Truck Parking Lot Site Requirements

This is not required for street locations.

1. Food trucks are only allowed on a parking lot at a brewery, distillery, or a park.
2. Private property parking lot locations need [written consent](#) from the owner. Business Licenses' staff must approve this. There may be up to three vendors in parking lots located outside of downtown.
3. Food Trucks cannot block drive aisles, impair the movement of pedestrians or vehicles, or pose a hazard to public safety. You must have a pedestrian walkway of no less than six (6) feet around the food truck. Ingress and egress must be through existing driveway openings only.
4. Food Trucks cannot park
 - a. next to a bus stop, taxi stand, or handicap loading zone;
 - b. within thirty (30) feet of an intersection or within three (3) feet of a curb;
 - c. in front of a commercial entryway.
5. Food Trucks may not park within five hundred (500) feet of a civic event, or a regional sports arena, without written consent of the organization.
6. The site cannot be within
 - a. (10) ten feet of the intersection of the sidewalk;
 - b. (8) eight feet of the adjacent property line;
 - c. (10) ten feet of the extension of any building entrance or doorway, to the curb line; or
 - d. (10) ten feet of any access ramp or parking space designated as disabled.

Site Plan Requirements

1. A site plan drawing, 2" = 1' or ¼" = 1', showing the food truck location in relation to fixed elements on the site. This should be submitted on 8 ½ x 11 paper. Include DBA, licensed kitchen address/location, and name and telephone number of contact person.
2. Label street names and the location where you plan to park the food truck.
3. Provide a description of how the vehicle will access the site.
4. Include measurements of the distance from the site to:
 - a. sidewalk intersection
 - b. adjacent property line
 - c. building entrance
 - d. parking lot entrance and exit
 - e. handicap parking spot

Food Truck Letter of Consent

This letter hereby authorizes _____ to park a food truck next to my
(food truck owner)

restaurant private property park board property located at _____.
(address of property)

This consent shall run concurrent with the license. If at any time the license expires or is revoked, this consent shall be void. The owner and operator of the food truck must follow all applicable sections of the Minneapolis Code of Ordinances (MCO) and State of Minnesota statutes. Failure to do so will cause the license for this location to be revoked.

I understand this consent may be revoked in writing with the revocation to become final on March 31st of the same calendar year. I understand that no money, either present or future, is part of this consent.

The food truck vendor agrees to hold harmless property owner park board for damage claims to property or injury claims to persons which may be caused by activity associated with the food truck license.

**Owner of property
or
Park Board
Representative**

Name _____
(please print)

Signature _____
(owner or legal representative)

Title _____

Telephone Number _____

Date _____

Food Truck Owner

Name _____
(please print)

Signature _____

Telephone Number _____

Date _____



Hold Harmless Statement

From:

Date:

Re: Mobile Food Vehicle Vendor Hold Harmless Statement

I, _____ shall hold harmless and indemnify the city, and applicable special service district, any of their officers and employees, for any claims for damage to property or injury to persons which may be caused by any activity carried on under the terms of the license.

Print Name

Signature

Date:

City of Minneapolis

Requirements for Insurance Certificates

Certificate of Liability Insurance

#5

Certificate cannot be pending, binder or TBA.

The Legal/Corporate Name must match exactly (word for word) to the Approved Licensee Name (including Inc, or LLC), Trade Name (DBA) and address of premises.

PRODUCER Agency Address City, State, Zip	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED	INSURERS AFFORDING COVERAGE INSURER A: INSURER B: INSURER C: INSURER D: INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____				EACH OCCURRENCE \$ _____ FIRE DAMAGE (Any one fire) \$ _____ MED EXP (Any one person) \$ _____ PERSONAL & ADV INJURY \$ _____ GENERAL AGGREGATE \$ _____
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS				PRODUCTS - COMPO/OP/AGG \$ _____ COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY \$ _____
	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON - OWNED AUTOS <input type="checkbox"/> _____				(Per person) BODILY INJURY \$ _____ (Per accident) BODILY INJURY \$ _____ PROPERTY DAMAGE \$ _____
	<input type="checkbox"/> _____ GARAGE LIABILITY				(Per accident) \$ _____ AUTO ONLY - (Ea Accident) \$ _____ OTHER THAN AUTO ACC \$ _____ ONLY: AGG \$ _____
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE \$ _____ AGGREGATE \$ _____ \$ _____ \$ _____
	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY				W/C STATUTORY LIMITS / OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
	OTHER				

Original signature or stamp of agent

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:
 ADDITIONAL INSURED; INSURER LETTER
 CERTIFICATE HOLDER
 City of Minneapolis
 Licenses and Consumer Services
 505 Fourth Ave. S., Room 220
 Minneapolis, MN 55415
 AUTHORIZED REPRESENTATIVE

Applications will be returned if requirements are not complete.



Food Business Plan Review Application

This application must be completed and emailed to development@minneapolismn.gov. This application is required if you are:

- Starting or building a new food establishment or converting an existing space into a food establishment
- Expanding or remodeling an existing food establishment
- Adding or changing any equipment that requires gas, mechanical, or plumbing permits
- Adding or changing ventless cooking equipment or ventless hoods

Applicant information			
Legal/Corporate Name of Business	Business Name/DBA		
Mailing Address	City	State	Zip Code
Name of Applicant	Email Address	Cell Phone Number	
Business Address	City	State	Zip Code
Construction category – Check one			
<input type="checkbox"/> New business/construction, new food truck/cart		<input type="checkbox"/> Remodel (New Owner, Same Business)	
<input type="checkbox"/> New or change of equipment requiring gas, mechanical or plumbing		<input type="checkbox"/> Remodel (Same Owner, Same Business)	
<input type="checkbox"/> New or change of ventless hood or ventless cooking equipment		<input type="checkbox"/> Remodel (Different Business)	
License type - Check all that apply			
<input type="checkbox"/> Commissary or Community Kitchen	<input type="checkbox"/> Food Manufacturer (Bakery, Deli, Café, etc.)	<input type="checkbox"/> Meat Market	
<input type="checkbox"/> Farmers Markets	<input type="checkbox"/> Grocery, Confectionery or Liquor Store	<input type="checkbox"/> Restaurant	
<input type="checkbox"/> Food Carts (Indoor, Kiosk, Sidewalk, etc.)	<input type="checkbox"/> Institutional Facility (Daycares, Schools, etc.)	<input type="checkbox"/> Vending Machine(s)	
<input type="checkbox"/> Food Shelf	<input type="checkbox"/> Mobile Food Unit (Trailers, Trucks, etc.)	<input type="checkbox"/> Other: _____	
Description of project			
Describe your project here.			
Other Information			
<input type="checkbox"/> Risk Level 1 <input type="checkbox"/> Risk Level 2 <input type="checkbox"/> Risk Level 3 Use the risk level definitions to determine your risk level.		Total square footage of new construction/remodel area _____ Number of floors where food operations take place _____	
Project start date: _____		Projected completion date: _____	

I. Required documents

After we receive your application, we will send you a link to the [ProjectDox website](#) and a temporary password. You will need to upload the following required documents.

1. **Floor plan:** Detailed and scaled floor plan of your kitchen and facility or vehicle. Include the location of all equipment and finishes for walls, ceilings, floors and base coves.
2. **Equipment list** and specification sheets for all equipment which must be ANSI/NSF certified or equivalent.
3. **Menu** and/or list of food items you plan to serve or sell. You may need a [HACCP](#) food safety plan, based on your menu.

II. Application Fee

There is a [fee](#) associated with this plan review application. We will call you with the amount of your fee, and to securely collect your payment over the phone. Please do not add your credit card information to this application. The fee is based on:

- Square footage of your new or remodeled space, and
- The risk category defined in the fee link.

If you have any questions about this application or the required documents, please call us at 612-673-3000. You can also email us at development@minneapolismn.gov or healthreview@minneapolismn.gov. Please refer to our [Food Establishment](#)