

**Lunch Wagon or Mobile Diner**



**VILLAGE OF COBLESKILL – PLANNING, ENVIRONMENT & CODES DEPT.**

378 Mineral Springs Road, Cobleskill, NY 12043

Phone: 518-234-4661 Fax: 518-234-4075

# LUNCH WAGON OR MOBILE DINER PERMIT APPLICATION

Mike Piccolo: cell: 518-706-0404  
email:pecceo@midtel.net

Brian Robson: cell: 518-948-6196  
email:pecsec@midtel.net

Vending Permit: \$15.00  
Operating Permit: \$35.00

Office Use Only

File # \_\_\_\_\_ Permit # \_\_\_\_\_ Date: \_\_\_\_\_  
District: \_\_\_\_\_ SBL # \_\_\_\_\_ Floodplain? Y / N

## Applicant Information

Applicant Contact Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Name: \_\_\_\_\_

TYPE OF VEHICLE USED:

Trailer  Motorized Food Truck  Other \_\_\_\_\_  Registration No. \_\_\_\_\_

**Note:** You will need to have a valid Schoharie County Health Department permit.

## Location Details

Where will you be set up?

Location Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Describe the set-up, merchandise, operation, and any buildings/shelters, etc. that will be in place:

\_\_\_\_\_  
\_\_\_\_\_

Will propane be used?  Yes  No

**Note:** If yes, you will also need an Operating Permit.

\_\_\_\_\_, **BEING DULY SWORN**, deposes and says that they are the Applicant above named, and that they are the  **OWNER** or  **OWNER'S AGENT/REPRESENTATIVE**, and are duly authorized to perform or have performed the proposed work, and to make and file this application; that all statements contained in this application package are true to the best of their knowledge and belief, and that the work will be performed in the manner set forth in the application and specifications filed therewith, and in accordance with applicable laws, ordinances, rules and regulations.

**THE APPLICANT RECOGNIZES THAT** it may be necessary for Village Staff or members of the Planning Board, the Historic District Review Commission, the Zoning Board of Appeals, and/or the Street Tree Committee to conduct an on-site visit of the exterior and/or interior of the property that is the subject of the application.

**THE APPLICANT HEREBY AGREES THAT** such on-site visit(s) may be conducted as deemed necessary. Whether a site visit is necessary for the purpose of reviewing the application shall be within the sole discretion of the Village Staff and/or Boards/Commission members.

**The Applicant Further Agrees**, that by submitting this application, the Applicant shall hold harmless the Village of Cobleskill, the Village Staff and/or Boards/Commission and their members and agents in their official and individual capacities for any damage or injury alleged to have been caused as a result of any on-site visit made pursuant to this application.

**SWORN TO BEFORE ME THIS** \_\_\_\_\_ **DAY OF** \_\_\_\_\_ **IN THE YEAR** \_\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Notary Public