



City of San Angelo
72 W. College
San Angelo, TX 76903

ACKNOWLEDGEMENTS

I acknowledge that all the information contained in the application for Mobile Food Unit permit is true and correct to the best of my knowledge and belief.

I acknowledge that the permit applied for shall be subject to all provisions of the codes and statutes and all rules adopted under the codes and statutes of the State of Texas governing food service establishment, retail food stores, mobile food units and roadside food vendors (Texas Food Establishment Rules) and the City of San Angelo Code of Ordinances.

I acknowledge that I was provided with the “Mobile Food Unit Permit Application Process and Guidance Documents”.

I acknowledge I have read the “Mobile Food Unit Permit Application Process and Guidance Documents” and understand and agree to comply fully with its provisions.

Signature of Applicant

Date

Printed Name of Applicant

Date