



**Mobile Vending Vehicle Permit Application – Form D: Addendum for Special Requests**  
Community Development Department | Code Enforcement Division  
300 E. Chapman Ave. | Orange, CA 92866 | (714) 744-7244

**PART 1 – SPECIAL REQUEST**

**Type of Request (check all that apply):**       Shade Structure / Umbrella     Generator     Portable sign(s)  
 Portable Cooking Equipment, Gas Fueled Appliance, Any Open Flame, Wood Burning Oven, Barbecue Grill  
 Other: \_\_\_\_\_

**First and Last Name of Applicant making the request:** \_\_\_\_\_

**Shade Structure / Umbrella Details:**

Height: \_\_\_\_\_ Width: \_\_\_\_\_ Length: \_\_\_\_\_ Color(s): \_\_\_\_\_

Shape: \_\_\_\_\_ Brand name: \_\_\_\_\_  Fire Certification label for Flame Resistant standard

Must attach a copy of fire certification for fabric materials meet or exceed the minimum requirements of one or more of the flame resistance standards.

**Generator Details:**

Generator Manufacturer: \_\_\_\_\_ Generator Size (wattage): \_\_\_\_\_

Fuel type:  Natural Gas  Propane  Diesel  Other: \_\_\_\_\_ Fuel Tank Capacity (gallons): \_\_\_\_\_

Cooling system:  Air cooled or  Liquid cooled    Certifications / Listings:  CARB Compliant or  EPA Approved

What will it be powering, please provide details? \_\_\_\_\_

**Portable Sign(s) Details:**

Height: \_\_\_\_\_ Width: \_\_\_\_\_ Length: \_\_\_\_\_ Number of signs: \_\_\_\_\_

Shape: \_\_\_\_\_ Type of sign: \_\_\_\_\_  Attach pictures of sign(s)

**Portable Cooking Equipment, Gas Fueled Appliance, Any Open Flame, Wood Burning Oven, Barbecue Grill Details**

Are foods prepared on-site?  Yes  No If yes, please describe the type of food being cooked? \_\_\_\_\_

Do foods require heating element inside or on mobile vending vehicle for preparation?  Yes  No

If yes, describe the type of cooking equipment or heating element to be used: \_\_\_\_\_

Type of Food Preparation (check all that apply):  Heating  Frying  Roasting  Popping  Blending

Steaming  Boiling  Baking  Other: \_\_\_\_\_

Manufacturer: \_\_\_\_\_ Model Name: \_\_\_\_\_

Fuel type:  Natural Gas  Propane  Electric  Other: \_\_\_\_\_ Fuel Tank Capacity (gallons): \_\_\_\_\_

G. Other Request Details:

Please describe other request? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART 2 – TERMS OF MOBILE VENDING**

Please read the full conditions, restrictions, operating requirements and prohibited activities listed in Chapters 5.53.140, 5.53.150, 5.53.160, 5.53.170 and 5.53.180. Please ensure that you understand all the Chapters listed above and have read and agree to abide by them.

I, THE UNDERSIGNED, ACKNOWLEDGE AND UNDERSTAND THAT I AM RESPONSIBLE FOR COMPLYING WITH THE INFORMATION, RESTRICTIONS, AND CONDITIONS OF THE MOBILE VENDING VEHICLE PERMIT WHEN ISSUED. I HAVE READ AND ACKNOWLEDGE THE PROVISIONS OF CHAPTER 5.53 OF THE ORANGE MUNICIPAL CODE, AND HEREBY ACKNOWLEDGE RESPONSIBILITY FOR PENALTIES ASSOCIATED WITH NON-COMPLIANCE WITH THE PERMIT CONDITIONS, WHETHER OR NOT I AM PRESENT AT THE TIME OF THE VIOLATION.

\_\_\_\_\_ INITIALS

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I have read and understand the provisions, rules and regulations of the City of Orange, California and the Municipal Code governing the type of vending permit for which I am applying. I declare, under penalty of perjury, that all of the information contained in this application and any accompanying documents is true and correct, with full knowledge that all statements made in this form are subject to investigation. Any false or dishonest answer to any question may be grounds for denial or subsequent revocation of permit.

\_\_\_\_\_  
**Applicant or Business Owner's Signature**

\_\_\_\_\_  
**Date**

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Office Use Only

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Shade Structure / Umbrella:                     | <input type="checkbox"/> Approved by: _____ | <input type="checkbox"/> Denied by: _____ |
| <input type="checkbox"/> Generator:                                      | <input type="checkbox"/> Approved by: _____ | <input type="checkbox"/> Denied by: _____ |
| <input type="checkbox"/> Portable sign(s):                               | <input type="checkbox"/> Approved by: _____ | <input type="checkbox"/> Denied by: _____ |
| <input type="checkbox"/> Portable Cooking Equipment or Heating Elements: | <input type="checkbox"/> Approved by: _____ | <input type="checkbox"/> Denied by: _____ |
| <input type="checkbox"/> Other requests                                  | <input type="checkbox"/> Approved by: _____ | <input type="checkbox"/> Denied by: _____ |
| <input type="checkbox"/> Other:  | <input type="checkbox"/> Approved by: _____ | <input type="checkbox"/> Denied by: _____ |