



Joe Davenport
Mayor

CITY OF LA GRANGE

307 W. Jefferson St.
La Grange, KY 40031
Phone: (502) 222-1433
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Frank Conway
Chief of Police

APPLICATION FOR MOBILE FOOD SERVICE OR FOOD TRUCK LICENSE

PLEASE PRINT OR TYPE THE INFORMATION BELOW (incomplete forms will be returned)

Name of Business	
DBA	
Street Address	
City/State/Zip	
Mailing Address	
City/State/Zip	
Phone/Cell Phone	
Location(s)*	

*Mobile food service establishments may not park on a city right of way. Any such violation will result in a fine and shall result in suspension of the right to conduct business in the city of La Grange for 30 days.

Proof of inspection by the Oldham County Health Department is required before this license can be issued.

NAME & TITLE (Print) _____ SS# or Federal ID# _____

EMAIL ADDRESS _____ Number of Employees _____

CALCULATE THE AMOUNT YOU OWE IN THE TABLE BELOW

License Length (Flat Fee)	AMOUNT		AMOUNT DUE
90 days	\$100.00	=	
One Year	\$350.00	=	

BE ADVISED THAT IF YOUR BUSINESS IS OPERATING/ CONDUCTING BUSINESS IN THE CITY OF LA GRANGE WITHOUT THE PROPER LICENSE, YOU WILL BE RESPONSIBLE FOR OBTAINING A BUSINESS LICENSE, AND PAYING ALL APPLICABLE LATE FEES, PENALTIES, INTEREST, LEGAL COSTS AND ATTORNEY FEES.

SIGNATURE _____ DATE _____

MAKE CHECKS PAYABLE TO THE CITY OF LA GRANGE. MAIL CHECK AND THIS FORM TO THE CITY OF LA GRANGE, 307 WEST JEFFERSON STREET, LA GRANGE, KY 40031. LICENSE RENEWALS ARE DUE ONE YEAR AFTER ISSUE. A PENALTY OF \$50-\$1000 AND A 1% PER MONTH CHARGE WILL BE ASSESSED IF THE BUSINESS LICENSE FEE IS NOT PAID BY 30 DAYS AFTER EXPIRATION.

FOR OFFICE USE ONLY

Date Received	License No.	Account No.	Amount	Vending	Penalty	Fee	Total Paid	Cash	Check

THE CITY OF LAGRANGE RESERVES THE RIGHT TO EXAMINE YOUR RECORDS FOR ACCOUNTABILITY