



1776 Newberg Hwy
Woodburn, OR 97071
Bus. Office 503-982-2360
Fax 503-981-5004

**Woodburn Fire District
Fire Prevention
1776 Newberg Highway, Woodburn, OR 97071
Mobile Food Vehicle Fire Safety Operational Permit Application**

Business Name: _____ Date: _____

Business Address: _____ City, State, Zip: _____

Owner: _____ DL#: _____ State: _____

Owner Address: _____ City, State, Zip: _____

Telephone #: _____ Cell Phone #: _____

Mobile Unit License Plate #: _____ Month/Year: _____

Marion County Environmental Health Permit/Classification: _____

_____ Date: _____

Service Location/s (Need Map Attached): _____

Mobile Unit Fire Protection Information

Fire Extinguisher/s Mfg., Type, Size, Location/s: _____

_____ Last Inspection Dates: _____

Fire Suppression System Type: _____

Original Reviewed/Approved Date: _____

Last Inspection/Test Date: _____

Any Changes, modifications to Mobile Unit requiring new inspection or additional fire protection systems installed: _____

Permit Application Instructions

This permit application can be filled out prior to or during a vehicle inspection, however, any violations of vehicle inspection must be resolved prior to issuing a permit to operate. This includes the permit and licensing through the Marion County Environmental Health "Food Licensing Program." Plans of vehicle design and installation must be provided for review and all information about the vehicle on page one and all additional pages must be complete. Fill out the following:

Number of Propane Tanks, Sizes and Location: _____

Detail of appliances/equipment utilizing propane: _____

Detail of appliances/equipment utilizing electrical: _____

Details of Generator, make/model, fuel tank size, location, etc.: _____

Details of Ventilation System, make/model, cfm output, etc.: _____

Make/Model, Vin# of Mobile Unit: _____

Fee Payment: Please enclose a check/money order for \$50 payable to Woodburn Fire District for the issuance of a Mobile Unit fire safety operational permit.

Print and sign name below. By signing and submitting this application packet, you confirm that all information is valid, complete, and correct.

Applicant Name (print): _____

Signature: _____ Date: _____