



Application Number: _____

City of Tracy
333 Civic Center Plaza
Tracy, CA 95376

**COMMUNITY & ECONOMIC
DEVELOPMENT DEPARTMENT**

PROPERTY OWNER AUTHORIZATION FORM

MAIN 209.831.6400
FAX 209.831.6439
www.cityoftracy.org

I, the undersigned, am the legal owner (or one of the legal owners) of the property located at _____, Tracy, California. I hereby authorize _____ to locate and operate a mobile food vendor business on my property listed above.

PROPERTY OWNER INFORMATION

Property Owner Name	Property Owner Signature	Date
_____	_____	_____
Mailing Address	Phone Number	E-mail Address
_____	_____	_____