



Application Number: _____

City of Tracy
333 Civic Center Plaza
Tracy, CA 95376

COMMUNITY & ECONOMIC
DEVELOPMENT DEPARTMENT

MAIN 209.831.6400
FAX 209.831.6439
www.cityoftracy.org

PROPERTY OWNER AUTHORIZATION FORM

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