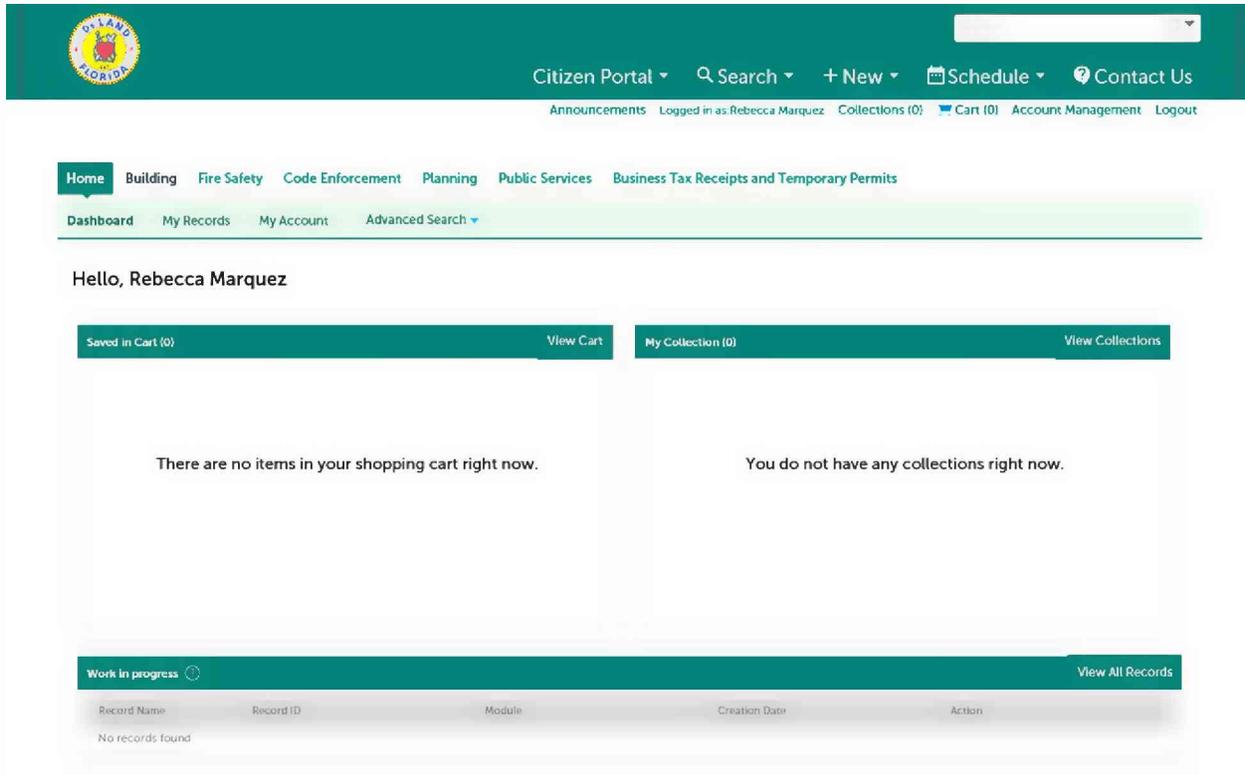


Creating A Food Truck Permit

Once you have logged in, you will reach the **Home** page under **Dashboard**.



You will then need to select the **Business Tax Receipts** module.

[Apply for a Tax Receipt or Temporary Permit](#)
[Search Tax Receipts or Temporary Permits](#)

Records

[Show on Map](#)

Showing 1-4 of 4 | [Download results](#) | [Add to collection](#) | [Add to cart](#)

<input type="checkbox"/>	Record Number	Record Type	DBA Name	Address	Expiration Date	Status	Action	Short Notes
<input type="checkbox"/>	BTR19-0060	Business Tax Receipt		120 S FLORIDA AV, DELAND FL 32720	09/30/2019	Declarations Due	Amendment	
<input type="checkbox"/>	SEP19-010	Tent and Seasonal Sales Permit		120 S FLORIDA AV, DELAND FL 32720		Pending		
<input type="checkbox"/>	BTC19-023	Business Tax Receipt Change	Rebecca's New Business			Pending		
<input type="checkbox"/>	BTD19-007	Business Tax Receipt Declaration			09/30/2019	Pending		

Search for Business Tax Receipts or Temporary Permits

Enter information below to search for records.

- Site Address
- Tax Receipt or Temporary Permit Information
- Parcel Number
- Record Information
- Contact Information

Select the search type from the drop-down list.

General Search

Enter your Business License search criteria below. Use the Start Date and End Date fields to enter parameters for the date the license was first issued.

- Search my records only
- Search All Records

Record Number:
 Record Type: --Select--

Project Name:

Under the Business Tax Receipts module, you will then select the subheader **Apply for a Tax Receipt or Temporary Permit**.

[Apply for a Tax Receipt or Temporary Permit](#)
[Search Tax Receipts or Temporary Permits](#)

Online Tax Receipt or Temporary Permit Application

Welcome to our Online Business Tax Receipt System. Using this system you can submit information, pay fees, and track the status of your application all from the convenience of your home or office, 24 hours a day.

Please "Allow Pop-ups from This Site" before proceeding. You must accept the General Disclaimer below before beginning your application.

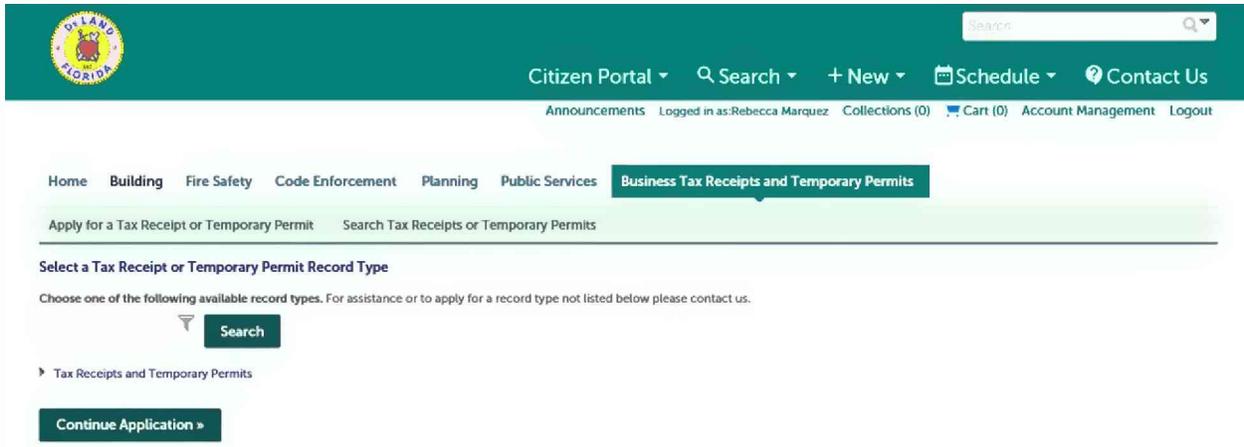
General Disclaimer

While the City of DeLand attempts to keep its Web information accurate and timely, the City of DeLand neither warrants nor makes representations as to the functionality or condition of this Web site, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Web materials have been compiled from a variety of sources and are subject to change without notice from the City of DeLand as a result of updates and corrections.

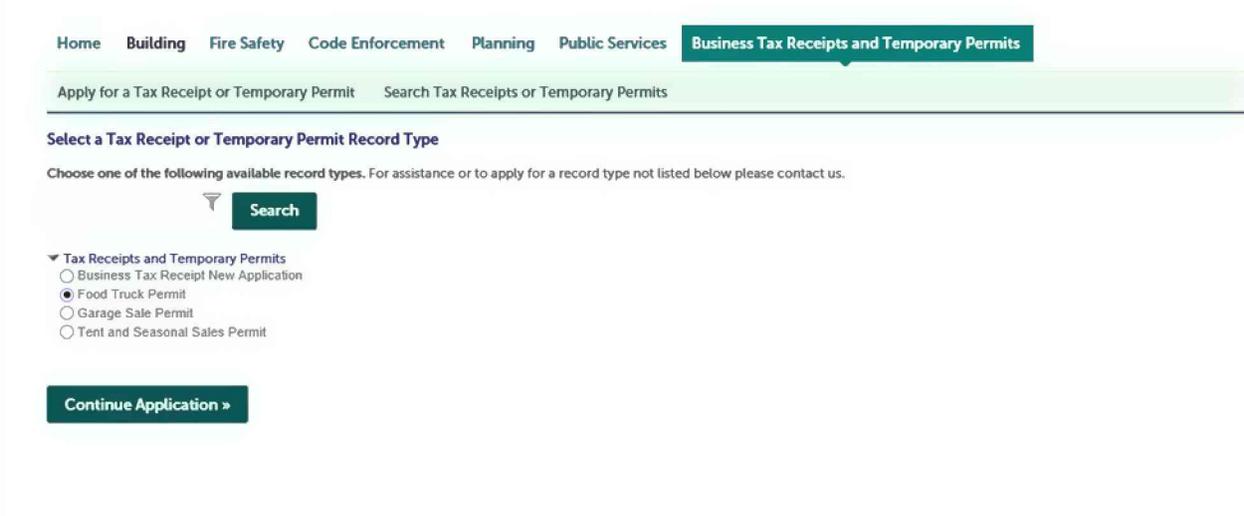
I have read and accepted the above terms.

Continue Application »

Read the General Disclaimer and select the check box beneath the disclaimer stating that you have read and accepted the terms. Once this has been done, you can select **Continue Application** to proceed.



Under the search box are options for the types of Business Tax Receipts you may select. Select **Food Truck Permit**.



Once you have selected the type, click the **Continue Application** button.

Food Truck Permit

1 Location & People	2 Step 2	3 Review	4 Pay Fees	5 Record Issuance
---------------------	----------	----------	------------	-------------------

Step 1 : Location & People > Location

* indicates a required field.

Address

Enter your business address and click Search to find the address record in the agency database.

*Street No.: Direction: *Street Name: Street Type:

Unit No.: Unit Type:

City: State: Zip: Country:

On this page you will insert the full street number and street name for your business address and select **Search**

Or

You may enter the parcel number and select **Search**.

Parcel

* Parcel Number:

Once the business location has been selected, the remainder of the information will automatically upload from the Volusia County Property Appraiser's database.

Owner

Owner Name:

Address Line 1:

Address Line 2:

City: State: Zip: Country:

Once the information has been entered and verified, select **Continue Application** to proceed.

Applicant

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

Select from Account

Add New

You will select the **Applicant**, or primary contact person, for the Food Truck Permit. You may do so by adding a completely new applicant or by selecting from account and having the information entered based on the provided information on the account.

Food Truck Information

FOOD TRUCK

Maximum of 12 days per year for site, please provide the dates below. Two days prior to event, vendors must notify the Fire Marshal.

* Size of the parcel the food truck(s) will be parked at in square feet:

* Describe Existing Property Use: Ex: Parking lot, Vacant, Park etc:

* The state certification number for the food truck license.:

* Number of Trucks:

* Day 1:



Day 2:



Day 3:



Day 4:



Day 5:



Day 6:



Day 7:



Day 8:



Day 9:



Day 10:



Day 11:



Day 12:



* Anticipated hours of operation, ex: 5 - 10 PM :

Fill out all fields applicable to your business. Some fields are required. Be sure to read over each section carefully to ensure that you are providing accurate information.

FOOD TRUCK SUBMITTAL

1. Site Plan Showing:
 1. Dimensions of the property
 2. Location of structure(s) on the property
 3. Vehicular accessways, driveways, circulation areas (include widths)
 4. Off-street parking and all existing sidewalks
 5. Refuse areas
 6. Landscape or buffer areas; and other open spaces
 7. Distances between trucks (if more than one)
 8. Restrooms(discretionary)
 9. Seating, if proposed
2. Authorization of owner, and/or affidavit of publication
3. Any information or exhibits necessary to demonstrate compliance to Land Development Regulations: For example lighting and signage

Authorization of owner, and/or affidavit of publication:

[Continue Application »](#)

[Save and resume later](#)

Read over the Submittal Requirements that must be attached on the following page. Select **Continue Application** once all information has been entered and the submittal requirements have been read.

Food Truck Permit

1 Location & People	2 Step 2	3 Review	4 Pay Fees	5 Record Issuance
---------------------	----------	----------	------------	-------------------

Step 2: Step 2 > Documents

* indicates a required field.

Site Plan, Owner Authorization

Please provide a site plan, owner authorization and any exhibit information for the event.

The maximum file size allowed is 100 MB.
htm,html,htm,html are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

[Select from Account](#)

[Add](#)

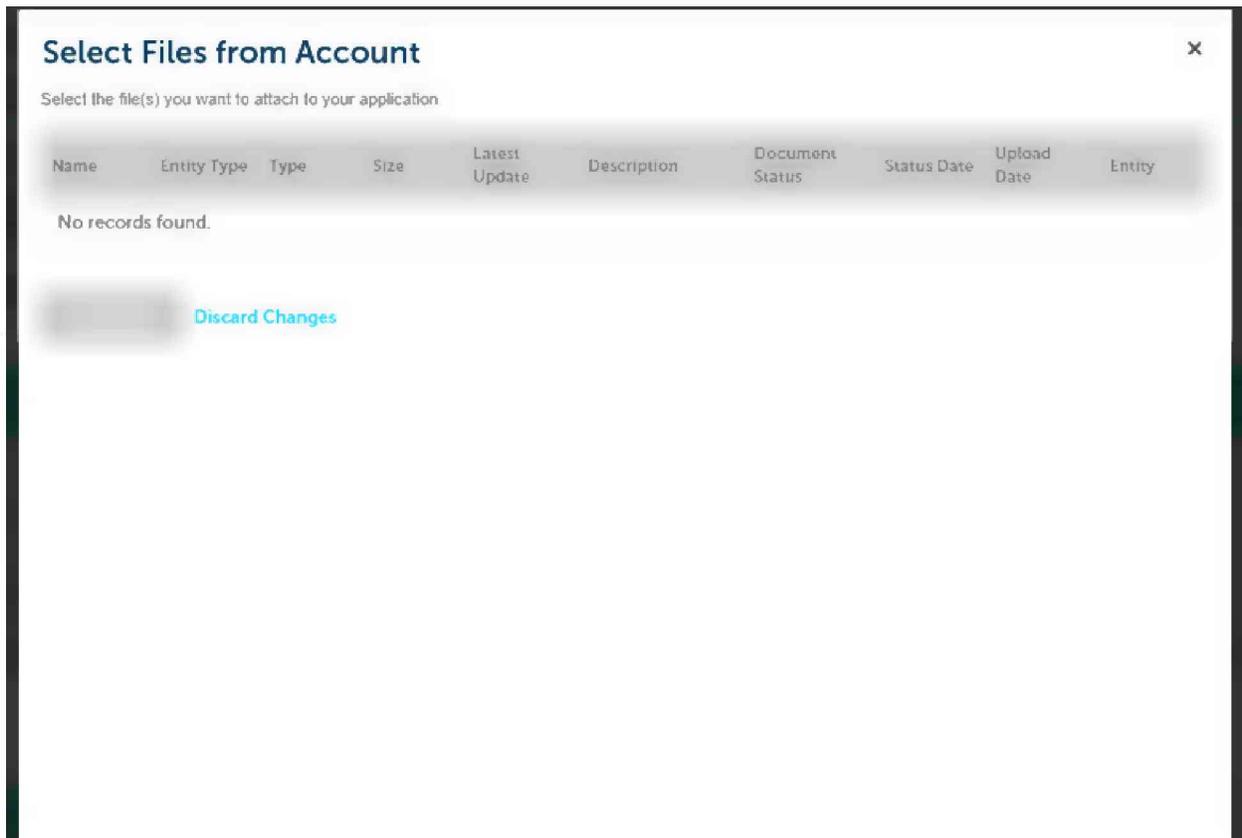
[Continue Application »](#)

[Save and resume later](#)

Upload any of the submittal requirements that apply to your Food Truck Permit.

To add a **Required Document**, choose:

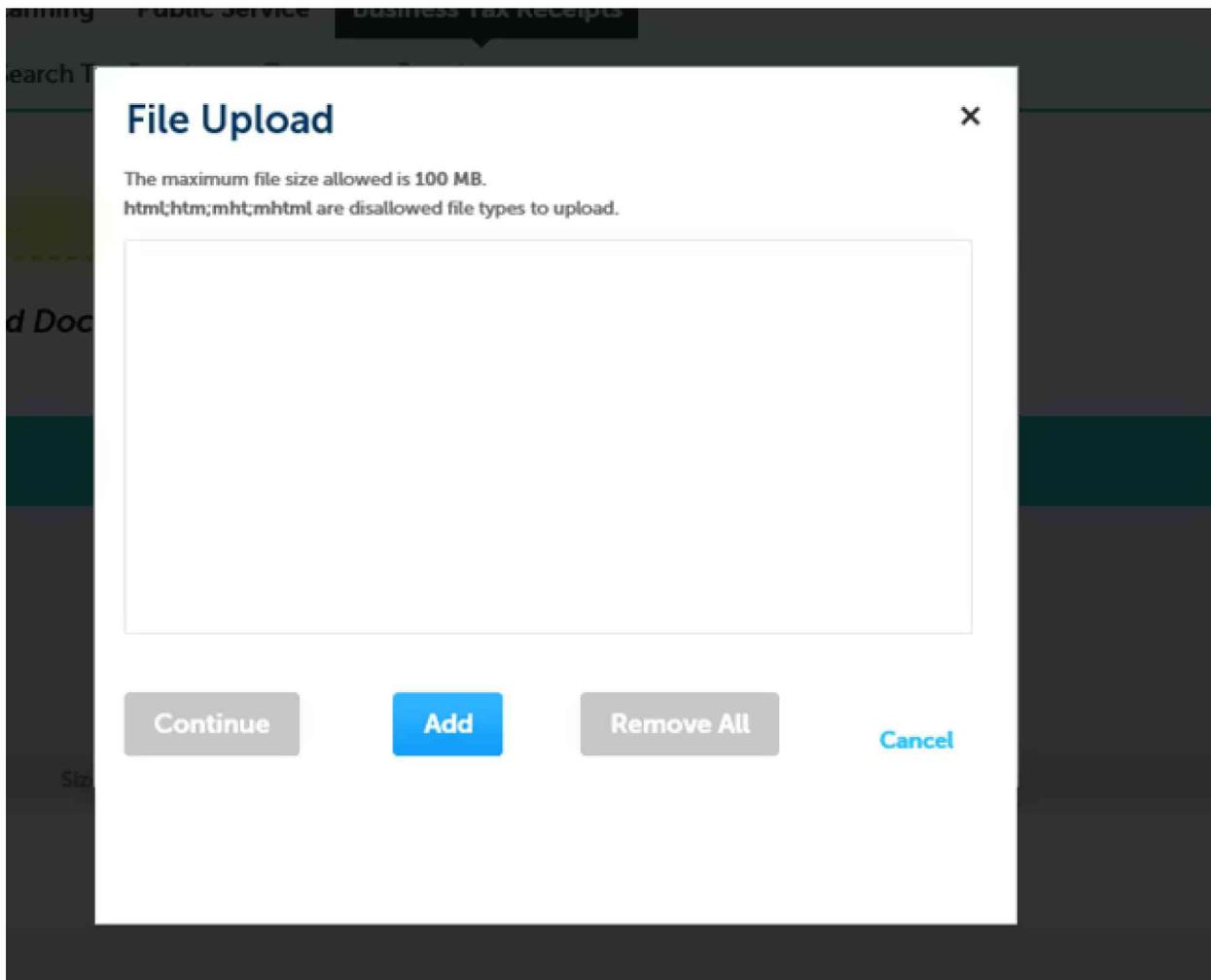
Select from Account



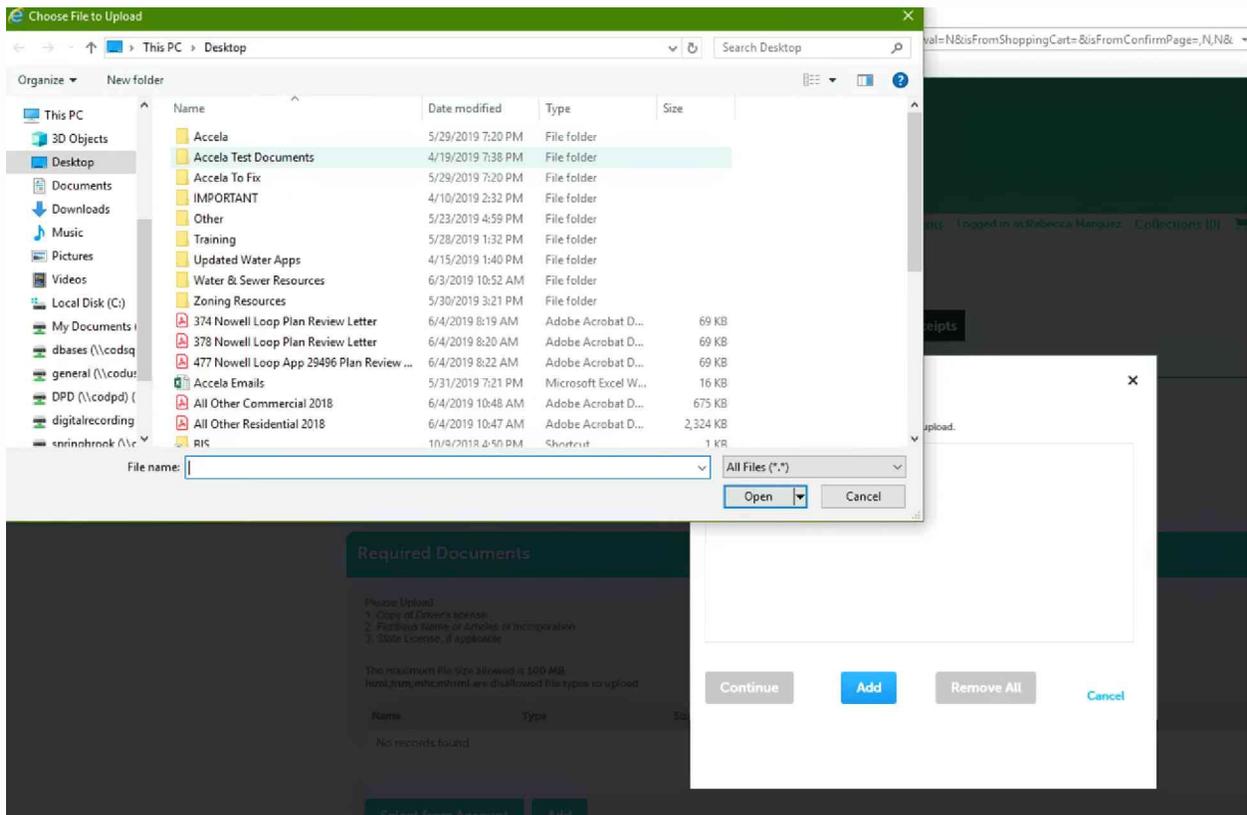
Once you choose **Select from Account**, a page will appear with any documents attached to your account. Select the appropriate document and click the **Continue** button.

or

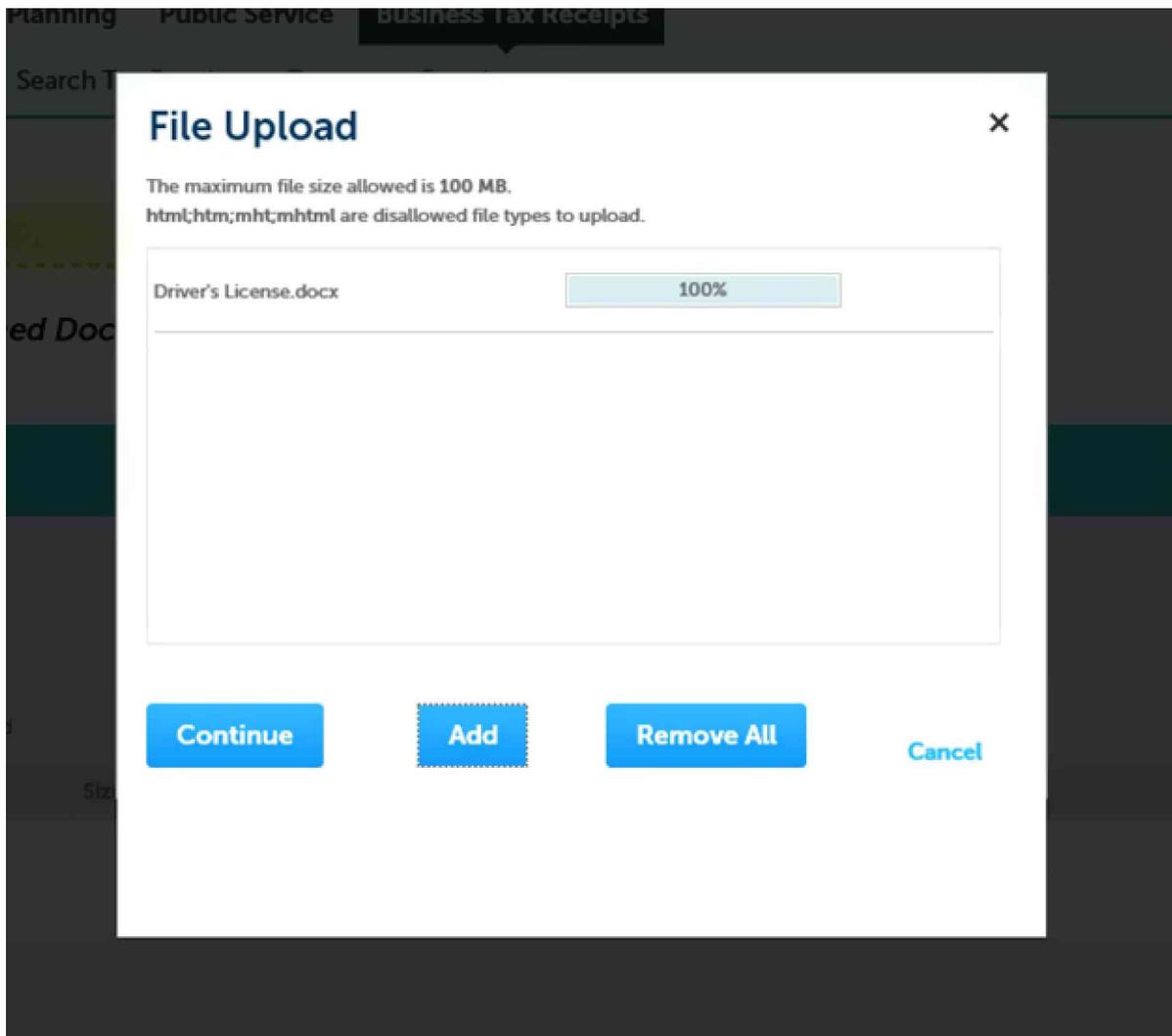
Add



Select **Add** under **File Upload** to gain access to the files on your computer ready to be uploaded.



Select the file you wish to add and then choose **Open**.



Once all the files have been uploaded, you will select **Continue**.

The **Required Documents** screen will expand to request further information of what you have chosen to upload.

You will be required to select the **Type** of document being uploaded for each. A description box is present if needed to give any further explanation needed.

Once all documents have been uploaded and updated accordingly, you must **Save** this page prior to selecting **Continue Application**.



The attachment(s) has/have been successfully uploaded.
It may take a few minutes before changes are reflected.

Food Truck Permit

1 Location & People	2 Step 2	3 Review	4 Pay Fees	5 Record Issuance
---------------------	----------	----------	------------	-------------------

Step 2: Step 2 > Documents

* indicates a required field.

Site Plan, Owner Authorization

Please provide a site plan, owner authorization and any exhibit information for the event.

The maximum file size allowed is 100 MB.
html;htm;mht;mhtml are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
Survey.pdf	Site Plan	75.25 KB	07/17/2019	Actions ▾

Select from Account

Add

Continue Application »

Save and resume later

Once you select **Save**, you will receive a message at the top of the screen confirming this or stating that changes need to be made.

Once all documents have been confirmed, select **Continue Application**.

Step 3: Review

Continue Application »

Save and resume later

Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on. You must check the box to agree to the certification at the bottom of the page before you can continue.

Record Type

Business Tax Receipt New Application

Work Location Edit

120 S FLORIDA AV
DELAND FL 32720

Parcel Information Edit

Parcel Number: 701652000020

Owner Information Edit

CITY OF DELAND
120 S FLORIDA AVE

Applicant Edit

Rebecca Marquez
City of DeLand
Primary/Cell Phone3866267008
E-mail:xluckyx24@gmail.com

Secondary Contact Edit

Rebecca Marquez
City of DeLand
120 S. Florida Ave.
DeLand, FL, 32720
Primary/Cell Phone3866267008

The next step is to verify that all of the information input into the application is correct and make any changes prior to submitting this application.

You may select **Edit** next to any of the sections to alter the information provided.

I understand that granting of the Business Tax Receipt implies only that the zoning of the location, as referenced on the Business Tax Receipt, in which I intend to operate my business is appropriate for that type of business. Additionally, I understand that the granting of a Business Tax Receipt does not waive my responsibility to ensure that all applicable requirements have been met. Additionally, I agree to hold the City of DeLand harmless for any damages that I may incur from failure to meet all City of DeLand requirements. I hereby swear and affirm that the information provided is true and correct to the best of my knowledge.

By checking this box, I agree to the above certification. Date:

[Continue Application >](#) [Save and resume later](#)

Once all of the information has been verified, read the Certification at the bottom of the page and select the check box if you agree. You must agree to continue.

Selecting the check box for the Certification agreement will build in a date on the right side of the bottom of the page above **Continue Application**.

Once this has been done, select **Continue Application**.

1 Select item to pay 2 Payment information 3 **Receipt/Record issuance**

Step 3: Receipt/Record issuance

Receipt

 Your update has been successfully submitted.

120 S FLORIDA AV, DELAND FL 32720

BTA19-087

This page will give you a confirmation and allow you to view the application number of the record.