



GROUND TRANSPORTATION FOOD-CATERING VEHICLE LIST

COMPANY: _____

DBA: _____

A copy of valid LA County Public Health Permit and DMV Commercial Registration¹ must be submitted for each vehicle.

*** OFFICE USE ONLY ***

License #	Fleet #	Year	Make	Model	Color	VIN	# Pax	Fuel Type	Vehicle Length	LA County Permit #	Decal #	Date Issued

Signature

Print Name

Title

Date