



MARK R. JOHNSON
Mayor

CITY OF COVINGTON
OCCUPATIONAL LICENSE DEPARTMENT
317 North Jefferson Avenue
Post Office Box 778
Covington, Louisiana 70434
phone 985.867.1214
fax 985.273.3014
website www.covla.com

OUTDOOR CONCESSION PERMIT APPLICATION (FOOD/BEVERAGE ONLY)

____ / ____ / ____
DATE OF APPLICATION

PLEASE NOTE
Outdoor Concession Permit Application must be submitted 21 days prior to the start of the Mardi Gras Parade Season.

Individual Name

Business Name

Mailing Address

Mailing Address

____ State ____ Zip

____ State ____ Zip

____ Phone ____ Email

____ Phone ____ Email

REQUIREMENTS

Please reference our City of Covington Code of Ordinance, Sec. 86-45 (attached).

- Must have permission from the property owner upon which the concession will operate (No concessions are permitted on public property). This requires a letter stating that the address of the location, diagram of the placement of the concession, and signed by both parties agreeing to the terms and conditions of the property owner.
- A full inspection is required by the Building Permits Department. *For more information, please call 985.898.4725.*
- Approval by the Police Department.
- Approval by the Fire Department.
- Approval by the Public Works Department.
- Approval by the Louisiana Department of Health. *For more information, please call 985.893.6296.*
- Completed Police Background Check Form for each person working. Form is attached and must accompany application(s). There is a \$10 fee for each background check.
- A copy of your current driver's license/photo ID must be attached, and your original signature must be on this application in order for your application to be process.

NOTE: Once application(s) is approved, each person will receive a concession vendor tag that must be worn at all times during the Mardi Gras event.

(I hereby certify all information submitted to the City of Covington is TRUE AND CORRECT. Failure to submit correct information may result in denial of application.)

SIGNATURE OF APPLICANT

____ / ____ / ____
DATE

INTERNAL APPROVALS

____ / ____ / ____
Building Permits Department Date

____ / ____ / ____
Police Department Date

____ / ____ / ____
Fire Department Date

____ / ____ / ____
Public Works Department Date

If denied, please state reason why: _____