

Acct.#



CITY OF HOUSTON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
Consumer Health Services Bureau
832-393-5100

PROPERTY AGREEMENT LETTER: (Complete **all parts** of letter.)

TO: CITY OF HOUSTON HEALTH DEPARTMENT

I, _____,
(person signing letter) (Write "owner" or "owner's agent")

OF THE FOLLOWING PROPERTY: _____,
(give property address)

GIVE PERMISSION TO: _____
(name of mobile unit owner)

OF _____,
(name of unit)

TO OPERATE HIS OR HER MOBILE FOOD UNIT ON ABOVE STATED PROPERTY.

Property owner's address: (required) _____

Property owner's phone number: (required) _____

Property owner's name (if signer is not owner): _____

Printed name of owner/representative: _____
(first) (middle initial) (last)

Signature of owner/representative: _____
(Date)

Signature of notary: _____

*Note: Person signing letter must be the property owner or someone with the legal authority to authorize property use on behalf of owner (i.e. leasing agent or the contract authorizes sub-leasing of parking lot) Revised 11/5/2010