



MOBILE FOOD VENDOR LICENSE ADDENDUM

To modify locations, dates, and times for operation of licensed mobile food vending vehicles, this form must be completed and submitted to the City for administrative review and approval.

**** PLEASE ALLOW 5 BUSINESS DAYS FOR PROCESSING. ****

LICENSE #: _____

SECTION 1: APPLICANT INFORMATION

APPLICANT:

E-MAIL ADDRESS:

HOME PHONE:

CELL PHONE:

BUSINESS NAME:

D/B/A:

BUSINESS PHONE:

BUSINESS EMAIL:

SECTION 2: VENDING INFORMATION

LIST ANY LOCATION(S) WITHIN THE CITY LIMITS, NOT LISTED ON THE ORIGINAL APPLICATION, WHERE MOBILE FOOD VENDING UNIT WILL BE OPERATING:

WILL YOU BE OPERATING ON PRIVATE PROPERTY: YES NO

IF YES, HAVE YOU PROVIDED WRITTEN CONSENT FROM THE PROPERTY OWNER OF THE PROPOSED LOCATION FOR CONDUCTING BUSINESS?
 YES NO

DESCRIBE ADVERTISING METHOD(S) MOBILE FOOD VENDING UNIT WILL BE USING:

LIST ANY DATES AND TIMES MOBILE FOOD VENDING VEHICLE WILL BE OPERATING THAT WERE NOT LISTED ON THE ORIGINAL APPLICATION.

DATE:	START:	FINISH:
DATE:	START:	FINISH:
DATE:	START:	FINISH:
DATE:	START:	FINISH:
DATE:	START:	FINISH:
DATE:	START:	FINISH:
DATE:	START:	FINISH:
DATE:	START:	FINISH:

SECTION 3: MOBILE FOOD VENDING VEHICLE INFORMATION

HAS VEHICLE REGISTRATION OR INSURANCE INFORMATION CHANGED SINCE FILING THE ORIGINAL APPLICATION? YES NO

IF YES, WHAT INFORMATION HAS CHANGED:

SECTION 4: SITE PLAN

ATTACH OR DRAW A SITE PLAN AND DETAILED DIMENSION DRAWINGS OF THE PROPOSED LOCATION(S):

SECTION 5: SIGNATURE

I, the applicant, do solemnly swear (of affirm) that:

- All answers given and statements made on this application are complete and true to the best of my knowledge and beliefs.
- I understand that all terms and conditions of the original approved license application remain in full effect, with the exception of any additional operation locations, dates, and times submitted in this addendum and approved by City administration.
- I understand that the additional operation locations, dates, and times submitted in this addendum must be reviewed by City administration prior to any operation of my mobile food vending vehicle at these locations on these dates and times.
- I understand that I will be provided with written approval for any accepted changes to locations, dates, and times.

Applicant Signature

Date

Print Name