CITY OF NEWTON, KANSAS
APPLICATION FOR
MOBILE FOOD VENDOR LICENSE

Fee: $50

APPLICANT INFORMATION:

Applicant Name: _____ DOB: _____

Applicant Address: _____ City: _____ State: _____ Zip: _____

Applicant Phone: _____ Email: _____

BUSINESS CONTACT (IF DIFFERENT FROM APPLICANT):

Contact Name: _____ DOB: _____

Contact Address: _____ City: _____ State: _____ Zip: _____

Contact Phone: _____ Email: _____

BUSINESS INFORMATION:

Business Name: _____ KS Sales Tax ID: _____

DBA Name: _____

Business Address: _____ City: _____ State: _____ Zip: _____

VEHICLE INFORMATION:

Vehicle Owner Name: _____

Vehicle Type and Make/Model: _____

VIN: _____

Inspection Permit Number: _____

Please provide a brief description of the nature of the business and the food to be offered for sale.

_____

_____

Has the Applicant ever had a mobile vending license or other similar license, permit, or registration revoked or suspended under the Code of the City of Newton or any similar laws of any other city or state?

_____

_____

Please provide a brief description of how the Unit will be stored or parked, in compliance with all ordinances and regulations of the City of Newton, when not in use. Failure by the applicant to legally store the Unit may result in the suspension or revocation of the applicant's license.

_____

_____

APPLICATION MUST INCLUDE THE FOLOWING:

1. Driver's License for operation of the class of vehicle or vehicles identified in the application for any agents or employees of the applicant who will be driving the identified vehicle or vehicles.
2. Proof that the applicant has procured a policy of general liability insurance covering the mobile vending operation and vehicle or vehicles written by an insurance carrier licensed to do business in Kansas, with a minimum limit of $500,000 combined, single limit for bodily and property damage per occurrence and $1,000,000 in the general aggregate: and evidence of compliance with these insurance requirements shall be in the form of a certificate of insurance.

The Applicant understands and agrees that the license issued will not be used or represented in any way as an endorsement of the applicant by the City of Newton or by any department, officer, or elected or appointed official of the City.

No person whose duties include working upon the premises of the Unit is a registered sex offender, and that applicant has, subject to audit, preformed the necessary background check of all such Persons to ensure that the statement is correct.

I,_____, the applicant, or an individual legally authorized to sign for a corporation, limited liability company or partnership, understand and agree to the statements above and to the provisions set forth in Chapter 11 in the Code of the City of Newton, Kansas, and certify that the information and answers herein contained are complete and true to the best of my knowledge.

_____ _____

Signature of Applicant Date