



City of Vandalia  
 Department of Development & Engineering Services  
 333 James E. Bohanan Memorial Drive  
 Vandalia, OH 45377  
 937.898.3750 | F 937.415.2319

# MOBILE FOOD VENDING LICENSE APPLICATION

**About this Application: ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED**

**Submittal**

Please bring in or mail a **complete** application and \$50.00 application fee to the address above. *Applications must be notarized.* Cash, credit card, and checks are accepted. Make checks payable to "City of Vandalia". *There are no refunds.*

**Approval Process**

Vendor License Applications are reviewed by the City Manager's Office and City of Vandalia Police Department. Efforts will be made to process complete applications within two business days.

If your application is approved, the Mobile Food Vending License will be issued. An additional \$50.00 fee will be collected when a license is issued. *There are no refunds. LICENSE MUST BE DISPLAYED IN WINDSHIELD OF MOBILE FOOD VENDING VEHICLE.*

**Contact Information**

If you have any questions about the Mobile Food Vending License, please contact the Department of Development and Engineering Services between 8:00 a.m. and 5:00 p.m., Monday-Friday at 898-3750.

**Additional Contact Information**

Department	Phone
Police	937-898-5868
City Manager's Office	937-898-5891
Finance	937-898-5891

**Please submit the following items for a complete application:**

- Photograph of applicant- taken within sixty days immediately prior to filing date of application. Must be 2" x 2" showing head and shoulders of applicant in a clear and distinguishing manner.
- A valid copy of all necessary licenses, permits, or certificates required by Mont. Co. Public Health, Mont. Co., the State of OH, or any subsidiary enforcement agencies or departments
- \$50.00 Application Fee
- Valid Ohio Dept. of Motor Vehicles Registration to the vehicle being used by the applicant
- Application completely filled out and notarized
- Valid Driver's Licenses of all of the vehicle operators

**OFFICE USE ONLY**

Review: DES  \_\_\_\_\_ PD  \_\_\_\_\_ CMO  \_\_\_\_\_  
Initial

APPLICATION # \_\_\_\_\_

RECEIPT # \_\_\_\_\_

DATE: \_\_\_\_\_

**Applicant Information**

Applicant Name:		Birthdate:		
Address:		Phone:		
City/State/Zip:		Email:		
Sex:	Weight:	Height:	Hair Color:	Eye Color:

**Employer Information (if employed)**

Employer Name:	
Address of Employer:	Phone:
City/State/Zip:	Email:

**Vehicle Description (that will be operated under the license being applied for)**

Make:	Model:
License Plate No.:	State of Registration:

**Proposed Activity Description**

Provide a brief description of the nature of the business and goods and/or services to be sold:

Place where goods or property is proposed to be sold AND/OR where you propose to take orders:

Length of time you will conduct business with this license:

How will the products sold be delivered?

Where are the products that you are selling produced?

**Applicant Information**

Have you been convicted of a felony or misdemeanor involving force, violence, fraud, theft, or a sexual oriented offense crimes, sexual abuse, rape, gross sexual imposition? (852.05 (b,iii) A copy of the ordinance is attached)

Yes  No

If yes, give the nature of the offense, name of court and location, date and penalty for **every** such conviction:

\_\_\_\_\_  
\_\_\_\_\_



*I do hereby solemnly swear that all of the information contained in this application is complete and truthful and that no information requested has been withheld or falsified in any whatsoever. I have reviewed reviewed Chapter 852.04, including but not limited to 852.19, regarding food truck operations.*

Applicant Name \_\_\_\_\_  
(printed)

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Sworn to and subscribed before me, a Notary Public, this \_\_\_\_\_ day of \_\_\_\_\_

Notary Name \_\_\_\_\_  
(printed)

Notary Signature \_\_\_\_\_

Commission Expiration Date \_\_\_\_\_

SEAL HERE

**Signed Statement**

The applicant and the firm for whom the applicant works shall hold harmless the City and its officers and employees, and shall indemnify and hold harmless the City and its officers and employees for any claims for damage to property or injury to persons which may be occasioned by any activity carried on under terms of the license. The applicant and the firm for whom the applicant works shall furnish and maintain commercial general liability coverage at least as broad as ISO Form CG 00 01, including products-complete operations coverage, against claims for damages to property or bodily injury, including death, which may arise from the operations under the license or in connection therewith. Such insurance shall provide coverage of not less than one million dollars (\$1,000,000) per occurrence. The policy shall further provide that it may not be cancelled except upon thirty (30) days written notice served upon the City Manager. A license issued pursuant to the provisions of this section shall be invalid at any time the insurance required herein is not maintained and evidence of continuing coverage is not filed with City Manager.

Applicant Name \_\_\_\_\_  
(printed)

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Employer Name \_\_\_\_\_  
(if applicable)

Employer Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>STAFF ONLY</b>	
<b>Chief of Police Review</b>	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied    Comments:
Chief of Police Signature _____	Date _____
<b>City Manager Review</b>	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied    Comments:
City Manager Signature _____	Date _____
<b>\$50.00 License Fee</b> <input type="checkbox"/>	<b>Date</b> _____
<b>License #</b> _____	<b>Receipt #</b> _____