

CITY OF HAYSVILLE

PO Box 404 200 W. Grand Haysville, KS 67060

Phone: 316/529-5900 | Fax: 316/529-5925

www.haysville-ks.com

Mobile Food Vendor License Application

**Submittal of a City of Wichita Mobile Food Vendor License does not guarantee approval of your application.

| APPLICANT INFORMATION | | |
|---|---|--|
| Full (Legal) Name: | Date of Birth: | |
| Permanent Address: | Applicant Phone: | |
| City, State, ZIP: | Email: | |
| Contact Name (if different from above): | Contact Phone: | |
| BUSINESS INFORMATION | | |
| Registered Business Name: | Business Phone: | |
| DBA Name: | Additional Phone: | |
| KS Food Establishment #: | KS Sales Tax #: | |
| Business Address: | City, State, ZIP | |
| Mailing Address: | City, State, ZIP | |
| Food and/or beverages to be offered for sale: Have you ever had a mobile vending license or other similar | license or registration revoked or suspended under the | |
| Code of the City of Haysville or any similar laws of any other | city or state? | |
| Will you be connecting to City services? Water/sewer? | □ Yes □ No | |
| VEHICLE INFORMATION | | |
| Make: | Type: | |
| Owner Name: | VIN: | |
| owner or employee who will be driving the identified Payment of the appropriate fee for the below specific One Month - \$25 Six Months - \$125 Beginning Da | the class of vehicle identified in the application for any vehicle. | |

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 Haysville or by any department, officer, or elected or appointed official of the City.

The applicant understands that all Mobile Food Vendor vehicles must be annually inspected by the Sedgwick County Fire Department prior to license issue.

No person whose duties include working upon the premises of the Mobile Food Vendor vehicle is a registered sex offender, and the applicant has, subject to audit, performed the necessary background check of all such persons to ensure that the statement is correct.

When the Mobile Food Vendor vehicle is not in use, it will be stored or parked in compliance with all ordinances and regulations of the City of Haysville and that failure by the applicant to legally store the vehicle may result in the suspension or revocation of the applicant's license.

| Before connecting to City services the C | ity Inspector must inspect and approve the connections. |
|--|--|
| corporation or partnership, state that u above and to the provisions set forth in | , the applicant, or individual legally authorized to sign for the pon signing this application, I understand and agree to the statements Chapter 5 of the Haysville Municipal Code and certify that the ned are complete and true to the best of my knowledge. |
| Signature of Applicant | Date |

| OFFICE USE ONLY | | | | | | |
|---|-------------------|-------------|------------|------------|------|--|
| Date/Time Application Received: | | Fee: | Receipt #: | | | |
| | Approved | Disapproved | Reason | | Date | |
| Chief of Police | | | | | | |
| Zoning Administrator | | | | | | |
| City Inspector* | | | | | | |
| City Attorney | | | | | | |
| The information provided on this application and attached hereto is found to be complete and satisfactory in accordance with the requirements of Chapter 5, Article 16 of the Haysville Municipal Code and a permit may hereby be issued. City Clerk or Designee: Date: | | | | | | |
| License #: | | Term:_ | | Exp. Date: | | |
| *Only if vendor is connec | ting to city serv | vices. | | | | |