

MOBILE FOOD VENDING APPLICATION

		APPLICANT INFORMATION	
Applicant Name:		Business/Organization:	
Phone Number:			
		VEHICLE INFORMATION	
Vehicle Description	:		
Driver's Lice	ense	Vehicle License	
Number:		Plate Number:	
		USE INFORMATION	
Date(s) of Us	se:		
Location of l	Jse*:		
□ One	Day Use	FEES AND CHARGES *Multiplied by Numb	\$5* er of Dates Requested
□ One	Year Use		-
□ Brick	and Mortar		\$0
Brick and Mortar Businesses/Organizations located in Buchanan will have fees waived.		re fees waived.	
	All other rules	s apply. Application must be received to have space reserve	ed.
Total Fee**:		Date Paid:	
	Payn	nent due at time of permit pick-up.	
	Ma	ke payments out to City of Buchanan.	
Internal Use Only:			
Depo	sit Refund Requested:		
Initia	l:		Authorized By
Date	of Refund Mailed:		

****NOTE:** Financial compensation may be sought under extreme circumstances due to loss and/or damages.

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- 1. All food vendors must secure & prominently display <u>permit</u> from the City of Buchanan.
- 2. Mobile Food Vendors are required to contact Berrien County Health Department at (269) 684-2800 for Temporary Food License and to list the City of Buchanan on their insurance.
- 3. Provide appropriate waste receptacles and removal of all waste, litter, and debris daily.
- 4. Follow Nuisance rules including loud/distracting sounds, décor and lighting.
- 5. All operations must be contained within the mobile unit including preparation and displaying of food.
- 6. No additional furniture, fixtures or equipment are permitted to be used outside of the mobile unit.
- 7. No vendor shall utilize electricity, power, or water without prior written approval from appropriate power customer.
- 8. Applicant shall not damage or remove property of any sort from the premises.
- 9. All vendors are subject to walk through and inspection by Police Department personnel at any time.
- 10. Applicant agrees to ensure that its guests, staff, and representatives during set-up, use, and tear down and all times in between follow and comply with all laws and regulations, including local, County, State and Federal relating to any and all health-related mandates. This shall include but is not limited to following health and safety measures, City codes and ordinances.

*Please refer to the Mobile Food Ordinance available at <u>www.cityofbuchanan.com</u> for full details.

AGREEMENT

I have read the above rules and regulations and will fully comply with them, and the items listed. I understand that I and other members of the business/organization applying for mobile food vending must comply with the provisions of these rules. I further understand that I am responsible for reimbursing the city of Buchanan for its reasonable clean-up and repair costs resulting from any littering or damage to the facilities resulting from the use of the space that has been reserved.

Signature of Vendor: _____

Date

THIS FORM IS VALID ONLY AFTER THE VENDING FEES HAVE BEEN PAID

Application for:

Approved By: _____



Date _____