



CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406
Phone: (775) 423-5104
Fax: (775) 423-8874



MOBILE FOOD VENDOR LICENSE APPLICATION

Application Type: New Renewal

Applicant Name: Ailyn Manzo S
Last First MI

Application Date: 05-14-23

Title: Owner

Phone: 775 200 4169

Email: Davidmendoza99@gmail.com

Address: 727 Sycamore Dr.

Date of Birth: [REDACTED]

Driver's License Number: [REDACTED]
Driver's License State: NV

Business Entity Type: Sole Proprietor Partnership Limited Liability Company DBA
 Corporation Association Other: _____

Business Name: MM Foodtruck

Business Owner(s):

Name	Address	Title
<u>Ailyn Manzo</u>	<u>727 Sycamore Dr.</u>	

Business Address (if applicable): 70 S. Maine St. Fallon NV 89406
City State Zip

Name of owner's authorized agent, if any: David Mendoza

Provide a description of the selling methods to be used and the nature of the products or services to be offered:
Foodtruck, selling tacos; cooking everything at the restaurant. The food is cooked at Carniceria and Taqueria Mendoza.

Have you owned or managed any other business? Yes No

If Yes, list the business(es) you have managed:

Begin/End	Name	Address	City	State	Zip



CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

Have you ever been issued a business or mobile food vendor license?

Yes

No

If Yes, when? _____

What Agency? _____

Have you ever had a business or mobile food vendor license revoked?

Yes

No

If Yes, when? _____

What Agency? _____

Have you ever been denied a business or mobile food vendor license?

Yes

No

If Yes, when? _____

What Agency? _____

Have you ever been arrested?

Yes

No

If Yes, provide the following information:

Date	Charge	Arresting Agency	Disposition

Vehicle Information (to be used for mobile vending):

Year of Vehicle	Make	Model	Plate Number
1982	GRMO	P30	274-U88

A copy of a valid, unexpired Nevada vehicle registration, if applicable, must be submitted with this application.

Health Permit:

A copy of proof of Nevada State Division health permit must be submitted with this application.

State of Nevada Department of Taxation

Proof of filing with the State of Nevada Department of Taxation must be submitted with this application.

I declare under penalty of perjury that the foregoing is true and correct:

1. That I have received and read a copy of Chapter 5.60 of the Fallon Municipal Code- Mobile Food Vendors.
2. That upon approval of a mobile food vendor license, I will conduct the business and business establishment in accordance with the provisions of the laws of the State of Nevada, the United States, and the ordinances of the City of Fallon applicable to the conduct of business; and
3. That the above information is true and correct to the best of my knowledge and belief and that such declaration is made with full knowledge that any failure to disclose, misstatement, or other attempt to mislead may be considered sufficient cause for denial of a mobile food vendor license.

Applicant's Signature



CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

AUTHORIZATION AND RELEASE

I, Ailyn Manzo, authorize the Fallon Police Department to perform a background check and to release the results of said investigation, which may include information of a confidential or privileged nature, to the City Council in public documents and/or discussion at a public meeting.

Applicant's Signature

Official Use Only

Ronald D. Wang
Recommended by Chief of Police or
Designee

6/27/23
Date

Not recommended by Chief of Police
or Designee

Date

City of Fallon Engineering/Building Department

[Signature]

Date 7/11/23

City of Fallon Attorney's Office

[Signature]

Date 7-11-23

City of Fallon/Churchill County Fire Dept.

[Signature]

Date 7-11-23

Account No. _____

License No. _____

Payment Receipt No. _____

FALLON POLICE DEPARTMENT

55 West Williams Avenue
Fallon, Nevada 89406-2941
775-423-2111
Fax: 423-6527

Ronald D. Wenger
Chief of Police

June 27, 2023

This letter certifies that Ms. Ailyn Manzo, of 727 Sycamore Drive Fallon, Nevada 89406, owner of "MM Foodtruck" mobile food vending truck, has completed application and has passed the background check, including local records check and CP Clear Database, for operating a mobile food vending truck within the City Limits of Fallon, Nevada.

I have confirmed that Ailyn Manzo is the owner of the Foodtruck and that David Mendoza is an authorized agent and has secured a Nevada Division of Public and Behavioral Health permit for the truck.

Additionally, I have met with Ms Manzo and provided her a copy of Fallon Municipal Code 9.60 which specifically lists the laws regarding Mobile Food Vending platforms. I reviewed the ordinance with Ms Manzo and she confirmed he understands her limitations and responsibilities as owner/operator of the business.

Sincerely,


Ronald D Wenger
Chief of Police

Business List

Select any business below to view details

BUSINESS NAME ↑	TAXPAYER ID	PRIMARY ADDRESS
MM FOODTRUCK	1044379553	70 S MAINE ST FALLON, NV 89406

Showing 1 - 1 businesses of 1

NEVADA DIVISION OF PUBLIC AND BEHAVIORAL HEALTH



500 DAMONTE RANCH PARKWAY #657
RENO, NEVADA 89521
OFFICIAL PERMIT

Permit No. CH-014-31497

AILYN MANZO

Operator of

MM FOODTRUCK

at 85 S MAIN E ST, FALLON, NV

is granted a permit to operate the following

Permit Description: FOOD ESTABLISHMENT (MOBILE UNITS)

Conditions of Permit: No restrictions

This establishment when inspected did comply with the public health laws of Nevada, and the rules, regulations and codes of the State of Nevada Division of Public and Behavioral Health in effect on this date.

THIS PERMIT IS NOT TRANSFERABLE AND MUST BE POSTED IN VIEW OF THE PUBLIC.

It is subject to revocation at any time this establishment is not maintained or is not operated in a sanitary manner, and in accordance with Nevada statutes, and with rules, regulations and codes of the Nevada Division of Public and Behavioral Health. This permit becomes null and void upon the expiration date.

Expiration Date: 02/29/2024

Official:

City of Fallon
55 W Williams Ave
Fallon NV 89406

775-423-5104

Receipt No: 2.477713

Jun 21, 2023

1115408
MM FOODTRUCK
AILYN MANZO
727 SYCAMORE DRIVE
FALLON NV 89406

Previous Balance:	100.00
Business License - BUSINESS LICENSE #56033	100.00
<hr/>	
Total:	100.00
New Balance:	.00
<hr/>	
General-CREDIT CARD	100.00
Payor: MM FOODTRUCK	
Total Applied:	100.00
<hr/>	
Change Tendered:	.00
<hr/>	

Duplicate Copy

06/21/2023 1:59 PM