

104 Maple Street W., Suite A
Amery, WI 54001



Office: 715.268.7486
Fax: 715.268.4870

CITY OF AMERY, WISCONSIN

Mobile Food Vendor Permit Application

City Hall | 104 Maple Street West, Amery, WI 54001

PERMIT TERM: January 1 - December 31 APPLICATION FEE: See City of Amery Fee Schedule. A reduced fee is available for vendors who also operate a licensed, permanent food establishment within the City of Amery. Fees are non-refundable and will not be pro-rated.

Instructions: This application must be completed in full. All required documents must be attached. Incomplete applications will not be processed. A separate permit is required for each mobile food establishment (vehicle/trailer/cart). Permits are non-transferable.

SECTION 1: APPLICANT & BUSINESS INFORMATION

Legal Name of Applicant/Owner: _____

Business Name (DBA): _____

Mailing Address: _____

City, State, ZIP: _____

Phone Number: _____

Email Address: _____

On-Site Point of Contact (if different from owner): _____

On-Site Contact Phone Number: _____

Is this business also a licensed, permanent food establishment located within the City of Amery? Yes No

If yes, please provide the business name and address: _____

SECTION 2: MOBILE FOOD ESTABLISHMENT (MFE) VEHICLE INFORMATION

Vehicle Type: Motorized Truck/Van Towed Trailer Push Cart

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Year: _____ Make: _____ Model: _____

Vehicle Identification Number (VIN): _____

License Plate Number & State: _____

Vehicle Dimensions (Length x Width x Height): _____

SECTION 3: PROPOSED OPERATIONS

Proposed Location(s) of Operation (Provide address for each private property location):
(Attach additional sheets if necessary. A separate site plan and property owner permission letter is required for EACH location.) 1. 2.

Proposed Days and Hours of Operation: _____

Brief Description of Business Operations (e.g., type of cuisine, service style): _____

SECTION 4: REQUIRED DOCUMENTATION CHECKLIST

Please ensure all of the following documents are included with your application.

- Completed & Signed Application Form**
- Application Fee**
- Certificate of Liability Insurance:** Minimum \$1,000,000 coverage, naming the "City of Amery" as an Additional Insured.
- Copy of Polk County Public Health Food Service Permit**
- Copy of Wisconsin Department of Revenue Seller's Permit**
- Copy of MFE Vehicle Registration**
- Proof of Passing Fire Safety Inspection from the Amery Fire Department**
- Written Permission from Property Owner:** A signed letter from the owner of EACH private property listed in Section 3, granting permission to operate on their premises.
- Site Plan for Each Location:** A drawing showing the proposed placement of the MFE, customer service area, parking, and any nearby structures or driveways.

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Typed Menu of all food and beverage items to be sold.

Current Photographs of the MFE (front, back, and both sides).

SECTION 5: APPLICANT ACKNOWLEDGEMENT & SIGNATURE

Under penalty of law, I declare that the information provided in this application is true, correct, and complete to the best of my knowledge. I have read and understand the City of Amery's ordinance regulating Mobile Food Establishments and I agree to comply with all its provisions and all other applicable federal, state, and local laws. I understand that failure to comply may result in fines and/or the suspension or revocation of this permit.

Applicant Signature: _____

Printed Name: _____ **Date:** _____

FOR OFFICE USE ONLY

Date Received: _____ **Fee Paid:** \$ _____ **Receipt #:** _____

Review Complete: Police Dept. Fire Dept. Public Works Clerk

Permit Approved: **Permit Denied:**

Permit Number Issued: _____ **Date Issued:** _____