



- Include a copy of:
- Driver License or Photo ID
  - 2x2 color photo less than 1 year old
  - Wisconsin Seller's Permit

**OFFICE OF THE CITY CLERK**

300 East Main Street  
 Sun Prairie, WI 53590-2227  
 (608) 837-2511  
 FAX (608) 825-6879  
 Website [www.cityofsunprairie.com](http://www.cityofsunprairie.com)

**MOBILE FOOD VENDOR / CART PERMIT - APPLICANT INFORMATION**

APPLICANT'S LAST NAME:			APPLICANT'S FIRST NAME:			MIDDLE INITIAL	OTHER NAMES USED / MAIDEN NAME
SEX	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	BIRTHDATE	APPLICANTS DRIVERS LICENSE - STATE AND NUMBER	
CURRENT RESIDENCE ADDRESS - PERMANENT						ARE YOU A WISCONSIN RESIDENT?	
STREET						<input type="checkbox"/> No <input type="checkbox"/> Yes - IF YES, HOW LONG? _____  If "no" please list the state that you are a permanent resident of, and how long you have been a resident there.  _____ _____	
CITY							
STATE / ZIP							
HOME PHONE NUMBER			CELL PHONE NUMBER			EMAIL ADDRESS	

**LIST OFFENSES FOR WHICH YOU HAVE BEEN CHARGE OR CONVICTED IN THE PAST FIVE (5) YEARS:**

Also, include offenses for which you have been released from prison or parole in the past five years. This includes but is not limited to any felony, misdemeanor, or ordinance violations involving alcohol or drugs, and any other traffic, licensing offenses and/or civil forfeiture violation from this or any other state, county or municipality.

**If you have none, Initial Here \_\_\_\_\_**

DATE OR MONTH AND YEAR	NATURE OF CHARGES	JURISDICTION WHERE CHARGED (City/State/County if known)	INDICATE IF CHARGE IS -PENDING -CONVICTED -RESOLVED

**LIST DATES AND PLACES OF RESIDENCE FOR THE PAST 5 YEARS:**

**If you have not lived anywhere else besides your current address, Initial Here \_\_\_\_\_**

DATE	ADDRESS	CITY/STATE

**Please include a copy of your driver's license or state issued identification card with the application and required fees.**

# MOBILE FOOD/VENDOR CART PERMIT APPLICATION

YEAR FOR WHICH THIS PERMIT IS APPLIED FOR		
DESCRIPTION OF GOODS TO BE SOLD		
DESCRIPTION OF FOOD TO BE PREPARED		
NAME OF FIRM YOU ARE WORKING FOR:		NAME OF SUPERVISOR PRIMARY CONTACT INFORMATION
NAME		NAME
ADDRESS		ADDRESS
CITY / STATE / ZIP		CITY / STATE / ZIP
PHONE NUMBER		PHONE NUMBER
EMAIL ADDRESS:		EMAIL ADDRESS:
WILL SALES BE MOBILE?	WILL SALES BE STATIONARY?	VEHICLE MAKE, MODEL, YEAR LICENSE PLATE # AND LICENSE PLATE ISSUING STATE BEING USED FOR SALES
<input type="checkbox"/> No <input type="checkbox"/> Yes *IF YES, PLEASE LIST ROUTE/AREA WHERE BUSINESS WILL BE CONDUCTED BELOW:	<input type="checkbox"/> No <input type="checkbox"/> Yes *IF YES, PLEASE LIST STATIONARY ADDRESS WHERE BUSINESS WILL BE CONDUCTED BELOW:	MAKE:  MODEL:  YEAR:  LICENSE PLATE #:  LICENSE PLATE ISSUING STATE:
HAVE YOU HELD A SOLICITORS PERMIT IN SUN PRAIRIE IN THE PAST FIVE (5) YEARS	Have you ever had any type of permit or license suspended, revoked or denied in this or any other municipality?	
<input type="checkbox"/> Yes    If so, WHEN?  <input type="checkbox"/> No	<input type="checkbox"/> Yes    If so, please specify municipality and dates.  <input type="checkbox"/> No	
LAST 3 CITIES IN WHICH BUSINESS WAS CONDUCTED INCLUDE THE NAME AND ADDRESS OF CONTACT PERSONS	ADDRESS & PHONE # WHERE APPLICANT CAN BE REACHED FOR AT LEAST 7 DAYS AFTER LEAVING THE CITY	
1.  2.  3.		
ARE YOU OVER THE AGE OF 18?	IF YOU ARE NOT OVER THE AGE OF 18, WHO WILL BE YOUR SPONSOR FOR THIS ACTIVITY? (PLEASE LIST BELOW) See Section 5.32.040 of City Ordinance	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Name (First, MI, Last):</b> Has this individual applied for and received a Solicitor's Permit this year? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## Is this application for a Mobile Food/Vendor Cart Unit?

Yes  No

If you answered "yes" please complete the following questions.

As the applicant for a Mobile Food/Vendor Cart, did you:

- Provide a copy of your Driver License, State ID or Government issued picture ID such as passport or Federal Document required for identification to conduct a background investigation?  Yes  No
  - 
  - Read the Licensing Guidelines, and understand that if this license is not issued, fees that have been paid will not be refunded. You acknowledge that you have also been provided a copy of Section 5.32 of the City Municipal Code of Ordinances as it pertains to Solicitors?  Yes  No
  - 
  - Provide a color photograph approximately two inches by two inches showing the head and shoulders of yourself, which has been taken not more than one year prior to such application?  Yes  No
  - Provide a copy of any other license or permit required by the State of Wisconsin, Dane County, or the City of Sun Prairie for the applicant's business activity?
    - A state certificate of examination and approval from the sealer of weights and measures where applicant's business requires use of weighing and measuring devices approved by state authorities;  Yes  No
    - A state health officer's certificate where applicant's business involves the handling of food, clothing, humans or animals and is required to be certified under state law; such certificate to state that applicant is apparently free from any contagious or infectious disease, dated not more than ninety (90) days prior to the date the application for a permit is made.  Yes  No
  - Provide a site plan for the location where the unit will be located if this is for an outdoor location? The plan shall include a drawing showing the street address, location of unit, signage to be used, traffic and pedestrian flow. The site plan will also state the size of the vending unit and equipment specifications.  Yes  No
  - 
  - Provide written authorization from a landowner to the outdoor vendor to use the landowner's premises for outdoor vending activities? The authorization document shall give the address of the property and the beginning and ending dates for such authorization.  Yes  No
  - Provide a copy of the approved special use zoning permit, if necessary?  Yes  No
  - 
  - Provide a sign-off of the application document that the applicant has met with and received approval from a member of the city planning department, and that the application complies with city zoning requirements and permits?
  - 
  - Provide a sign-off of the application document that the applicant has met with and received approval from the Recreation and Public Works Directors, and that the application complies with all requirements of that department, if the outdoor vendor is to be located in a city park?  Yes  No
- These will be done through the application review process

## Is this application for an individual working in the Mobile Food Cart? Yes No

If you answered "yes" please complete the following questions.

As the applicant did you:

- Provide a copy of your Driver License, State ID or Government issued picture ID such as passport or Federal Document required for identification to conduct a background investigation?  Yes  No
- Read the Licensing Guidelines, and understand that if this license is not issued, fees that have been paid will not be refunded. You acknowledge that you have also been provided a copy of Section 5.32 of the City Municipal Code of Ordinances as it pertains to Solicitors?  Yes  No
- Provide a photograph approximately two inches by two inches showing the head and shoulders of yourself, which has been taken not more than one year prior to such application?  Yes  No

**TO: CITY COUNCIL OF THE CITY OF SUN PRAIRIE, WISCONSIN**

Applicant agrees to provide a copy of their Driver License, State ID or Government issued picture ID such as passport or Federal Document required for identification to conduct a background investigation. The undersigned affirms that he/she made COMPLETE AND TRUE answers to each question and understands that his/her past record will become part of this application. The undersigned is also aware that incomplete or false answers may result in denial or revocation of permit and authorizes a review of and full disclosure of any and all records, files and reports, which include any police contact as well as arrests.

Did you read the Licensing Guidelines, and understand that if this license is not issued, fees that have been paid will not be refunded. You acknowledge that you have also been provided a copy of Section 5.32 of the City Municipal Code of Ordinances as it pertains to Solicitors. ....  Yes  No

Applicant realizes that this is not a license or permit to sell, peddle, or solicit in the City of Sun Prairie, nor is it a guarantee of the applicant's integrity or an endorsement of the product. This does not relieve the applicant of compliance with City Ordinances or State Statutes. Until the permit is approved and issued this is only an application. ....  Yes  No

As the applicant, I hereby agree to comply with all laws, Resolutions, Ordinances and Regulations, Federal, State, or Local affecting the direct seller, peddlers, or solicitors if a license is granted to me. Applicant acknowledges that any sales or solicitations must comply with posted notices of "NO SOLICITORS" or like notices in writing, or given verbally by the property owner or person in lawful control of the property.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Call or  Email me I will pick up my license when it is ready

FEES: - The permit fee for a mobile food vending unit shall be \$150.00 per year. The permit shall be good from January 1 through December 31 of the year for which the permit is granted.  
- A permit is required for each cart. The fee for each mobile food vendor is \$25.00.  
- In addition to the fees stated, all processed applications will be assessed the actual cost of the background check as incurred by the city. (\$7 each)

**OFFICE USE ONLY** - Application and fees accepted by MS / AL / EH / \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / 20

FEES: Application is for \_\_\_\_\_ **MOBILE FOOD CART @ \$150 PER CART**  
Application is for \_\_\_\_\_ **MOBILE FOOD VENDOR @ \$25 PER PERSON** Total Fees collected: \_\_\_\_\_  
Application is for \_\_\_\_\_ **\$7.00 BACKGROUND CHECK FEE PER PERSON**

Applicant has met with and received approval from a member of the city **Planning Department**, and the application complies with city zoning requirements and permits.

A Special Use Permit (SUP)  is  is not required. \_\_\_\_\_ A SUP has been obtained, if needed

Signature of City Planner or his/her designee \_\_\_\_\_

In regards to the issuance of this license, the Sun Prairie **Police Department**:

- \_\_\_\_\_ has no objection.
- \_\_\_\_\_ does have an objection which is detailed, with a recommendation, in the attached report.
- \_\_\_\_\_ recommends further review and consideration for action by the city attorney with a report to follow due to the following: \_\_\_\_\_

Signature of Police Chief or his/her designee \_\_\_\_\_ DATE \_\_\_\_\_

Signature of City Clerk or his/her designee \_\_\_\_\_ DATE \_\_\_\_\_

**Food Cart Permit Number** \_\_\_\_\_ **Permit Effective** \_\_\_\_\_ **Permit Expires** 12/31/20

**Food Vendor Permit Number** \_\_\_\_\_ **Permit Effective** \_\_\_\_\_ **Permit Expires** 12/31/20

**AUTHORIZATION FOR USE FROM BUILDING/PROPERTY OWNER**

Name of Business making application: \_\_\_\_\_

Address \_\_\_\_\_

Applicants name: \_\_\_\_\_

Property Owners Name \_\_\_\_\_

As owner of the property located at \_\_\_\_\_

I have knowledge and give permission for this business to make application and use the above state property for a business use for a Mobile Food Cart

Property Owners Signature \_\_\_\_\_

Date: \_\_\_\_\_