

APPLICATION FOR MOBILE FOOD VEHICLE PERMIT
(Ord. 729.01 et seq.)

MUST BE COMPLETED BY THE MOBILE FOOD VEHICLE OPERATOR:

Applicant Name: _____

Business or Food Truck Name: _____

Type of entity: Corporation Partnership S-Corporation LLC Sole Proprietorship

Street address of business: _____

City/State/Zip of business: _____

Telephone No.: _____ Fax No.: _____

Date of submission: _____ Email address: _____

Description of event for which permit is sought:

Name or general nature of event: _____
(Examples: "That Day in May", graduation party, wedding, block party, etc.)

Name of event sponsor/host: _____
(Must be an Oakwood resident/property owner)

Street address for event: _____

Date of event: _____ Hours/duration of event: _____

Estimated number of participants: _____

Event type: Single (1 day or less) Multi-day (1-3 consecutive days) Regularly-recurring (weekly or monthly)

By signing this form, I/we acknowledge and agree to the following:

1. This form is required by law and is being submitted to obtain a Mobile Food Vehicle permit;
2. The undersigned is duly authorized to sign this document on behalf of the Applicant;
3. If a permit is granted pursuant to this application, the Applicant shall indemnify and hold the City and its officers and employees harmless for any claims for damage to property or injury to persons which may be occasioned by any activity carried out under terms of the permit; and
4. I/we understand that knowingly making a false statement on this permit application form is a violation of Ohio Revised Code Sec. 2921.13(A), which is a first degree misdemeanor punishable by a fine of up to \$1,000 and/or up to 6 months in jail.

Applicant signature:

Applicant Signature Printed name AND title, if any

NOTE: ALL INFORMATION CONTAINED IN THIS APPLICATION IS SUBJECT TO DISCLOSURE AS A PUBLIC RECORD

- Required attachments:**
- \$10 permit fee made payable to the City of Oakwood
 - Certificate(s) of insurance (public liability, food products liability, auto, property)
 - BMV registration for the mobile food vehicle
 - Certificate of incorporation, if any
 - Certificate of Inspection/Food Service License for the mobile food vehicle
 - Valid driver's license(s) for all vehicle operator(s)
 - Tax release form

FOR OFFICIAL USE ONLY **(REV. 4/2019)**

Complete application Missing item(s): _____

Event size & location can reasonably accommodate add'l permits (Total to be made available: _____)

Approved by: _____ Date: ____/____/____ Permit ____ of ____ for this event

**MOBILE FOOD VEHICLE
AUTHORIZATION FOR TAX ACCOUNT REVIEW
AND RELEASE OF GOOD STANDING CERTIFICATE ***

NAME: _____

(Please Print)

BUSINESS/ORGANIZATION NAME:

(including DBA's if applicable)

(Please Print)

ADDRESS:

Street (PO Box not accepted) _____

City _____ Zip Code _____

SOCIAL SECURITY NUMBER _____ - _____ - _____

TELEPHONE NUMBER () _____

I certify that the above information is correct and hereby authorize the City of Oakwood Income Tax Department to review any and all related tax accounts and release the Certificate of Good Standing* or the denial thereof to the City of Oakwood Finance Department.

I understand that the issuance of this certificate will require the filing of a City of Oakwood income tax return (to be filed April 15th of the following year) as I am performing services within city limits.

Authorized Signature Date

* The Certificate of Good Standing does not disclose income or other tax specific items and only serves to verify that tax accounts are in compliance with the Oakwood Municipal Income Tax Ordinance.

* * * * *

For Department Purposes Only:

Acct # _____ Rec _____
Date _____ Init _____ I / D