

BUSINESS LICENSE APPLICATION

APPLICATION NO. _____ **ANNUAL LICENSE FEE DUE MAY 1ST: \$** _____

(PLEASE TYPE OR PRINT)

1. Applicant's Name: _____ PHONE () _____
2. Applicant's Address _____
City _____ State _____ ZIP _____
3. Length of resident at above address _____ years _____ months
4. Applicant's Date of Birth ____/____/____ Social Security No. _____
5. Marital Status _____ Name of Spouse _____
6. Citizenship of Applicant _____
7. Business Name _____ PHONE () _____
8. Business Address _____
City _____ State _____ ZIP _____
9. Length of Employment _____ years _____ months
10. All residences and addresses for the last three (3) years if different than above:

11. Name and Address of employers during the last three (3) years if different than above:

12. List the last three (3) municipalities where applicant has carried on business immediately preceding the date of application:

13. A description of the subject matter that will be used in the applicant's business:

14. Has the applicant ever had a license in this municipality? [] Yes [] No
If so, when _____
15. Has a license issued to this applicant ever been revoked? [] Yes [] No
If "yes", explain: _____
16. Has the applicant ever been convicted of a violation of any of the provisions of this Code, etc.? [] Yes [] No
If "yes", explain: _____
17. Has the applicant ever been convicted of the commission of a felony? [] Yes [] No
If "yes", explain: _____
18. LICENSE DATA: Term of License _____
Fee for License \$ _____
Sales Tax Number _____
License Classification _____
19. LIST ALL OWNERS IF LICENSE IS FOR LOCAL BUSINESS (PERMANENT):

20. LOCATION OF BUSINESS: _____

OFFICIAL BUSINESS LICENSE

STATE OF ILLINOIS)
COUNTY OF BROWN) ss.
CITY OF MT. STERLING)

ILLINOIS SALES TAX NUMBER _____

TO ALL TO WHOM THESE PRESENTS SHALL BECOME GREETINGS:

WHEREAS _____, having complied with all the requirements of the laws of the State of Illinois and the ordinances of the **City of Mt. Sterling, Illinois** in this behalf made and required license is, by authority of the **City of Mt. Sterling, Illinois** given and granted to the _____ to _____ at _____ in the **City of Mt. Sterling, County of Brown, and State of Illinois**, from the _____ date hereof until the _____ day of _____, _____, said _____ to be subject to all laws of the State of Illinois and all ordinances of the **City of Mt. Sterling, Illinois**, not in conflict therewith, which are now or hereafter may be in force touching the premises.

(L.S.)

Given under the hand of the Mayor of the **City of Mt. Sterling, County of Brown, Illinois** and the seal thereof, this _____ day of _____, _____.

MAYOR
CITY OF MT. STERLING

COUNTERSIGNED:

CITY CLERK
CITY OF MT. STERLING

(SEAL)

CITY OF MT. STERLING

APPLICATION FOR MOBILE FOOD VENDOR'S LICENSE

1. Applicant's Name: _____
Address: _____

 2. Business Name: _____
Business Address: _____
Phone Number: _____

 3. Food Vendor/Operator Name: _____
Address: _____
Phone Number: _____ Date of Birth: _____

 4. Food Truck Driver Name: _____
Address: _____
Phone Number: _____ Date of Birth: _____

 5. Food Truck Make: _____ Model: _____ Year: _____
License Plate Number: _____ State: _____ Vehicle Length: _____

 6. Commissary/Food Supplier Name: _____
Address: _____
Phone: _____
(additional sheets should be attached if needed)

 7. Name, address and phone number of business or location where oil, fat, grease, refuse, litter and/or garbage will be disposed of properly in accordance with all rules, regulations, ordinances etc.
Name: _____
Address: _____
Phone: _____
(additional sheets should be attached if needed)

 8. Location applicant plans to sell food – Address: _____
Name of Owner/Tenant of Property: _____
Phone: _____

 9. The following documentation is required when submitting application:
 - A. Copy of food truck vehicle registration.
 - B. Copy of each food truck driver's valid license to operate the vehicle.
 - C. Copy of food truck/food cart applicant's certificate of liability insurance with City named as additional insured with *comprehensive general liability limits* of not less than One Million Dollars (\$1,000,000) each occurrence/aggregate covering bodily injury, personal injury, and property damage.
 - D. Copy of food truck applicant's certificate of liability insurance with the City named as additional insured with *comprehensive vehicle insurance limits* of not less than One Million Dollars (\$1,000,000) each occurrence/aggregate covering all owned, non-owned, and hired vehicles for bodily injury, personal injury and property damage.
 - E. Copy of food truck/cart Illinois worker's compensation insurance as required by Illinois law.
 - F. Copy of Brown County Health Department permit.
 - G. Copy of Illinois Retailer Occupation Tax Certificate.
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I, _____, the duly acting City Clerk for the City of Mt. Sterling, County of Brown, State of Illinois, do hereby certify that the above name(s) has applied for a license or permit in person before me this _____ day of _____, 20____, and acknowledge that they signed and sealed this instrument as his/her free and voluntary act, for the uses and purposes stated above.

This gives the above applicant permission to operate in the City of Mt. Sterling for the above uses or purposes so stated. Given under the City Seal this _____ day of _____, 20____.

(SEAL)

City Clerk

I, _____, Title _____, of the City of Mt. Sterling Police Department, County of Brown, State of Illinois, do hereby certify that the above applicant has contacted this department this _____ day of _____, 20____. The applicant's background check is free and clear of issues keeping them from operating within the City.

Mt. Sterling Police Department