

**NON-REFUNDABLE APPLICATION FEE: \$100/YEAR, \$50 FOR 3 DAYS**

PERMIT FEE: \_\_\_\_\_  
PERMIT NO. \_\_\_\_\_

VILLAGE OF NEW GLARUS  
MOBILE FOOD VENDOR PERMIT  
APPLICATION DATE: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ SEX: \_\_\_\_\_  
HAIR COLOR: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_  
DRIVER'S LICENSE NUMBER: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

ARE YOU A WISCONSIN RESIDENT? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF NO, PLEASE LIST THE STATE YOU ARE A PERMENANT RESIDENT OF AND HOW LONG YOU  
HAVE BEEN A RESIDENT THERE: \_\_\_\_\_

DATE(S) FOR WHICH PERMIT IS REQUESTED: \_\_\_\_\_  
\_\_\_\_\_

DESCRIPTION OF LOCATION WHERE FOOD VENDOR WILL BE LOCATED: \_\_\_\_\_  
\_\_\_\_\_

DESCRIPTION OF FOOD TO BE PREPARED: \_\_\_\_\_  
\_\_\_\_\_

VEHICLE USED FOR SALES: \_\_\_\_\_  
Make Model License Plate # State

HAVE YOU BEEN CONVICTED OF ANY CRIME OR ORDINANCE VIOLATION RELATED TO YOUR  
BUSINESS WITHIN THE LAST FIVE (5) YEARS?  
YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, NATURE OF OFFENSE: \_\_\_\_\_  
PLACE OF CONVICTION: \_\_\_\_\_

HAVE YOU EVER HAD ANY TYPE OF PERMIT OR LICENSE SUSPENDED, REVOKED, OR DENIED  
IN THIS OR ANY OTHER MUNICIPALITY?  
YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, PLEASE SPECIFY MUNICIPALITY & DATES:  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, HEREBY CERTIFY THAT IN MAKING THIS APPLICATION, I HAVE TRUTHFULLY ANSWERED ALL QUESTIONS CONTAINED HEREIN TO THE BEST OF MY KNOWLEDGE AND BELIEF; THAT I AM AWARE OF THE PROVISIONS OF THE NEW GLARUS VILLAGE ORDINANCE REGULATING DIRECT SELLERS AND AGREE TO ABIDE BY ITS CONDITIONS; AND THAT I AM AWARE THAT ANY FALSE STATEMENT OR ANSWER ON THIS APPLICATION VOIDS THE LICENSE THAT MAY BE ISSUED ON THE BASIS OF THE FACTS HEREIN CONTAINED.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

WITNESS: \_\_\_\_\_

Clerk-Treasurer / Deputy Clerk-Treasurer  
Chief of Police  
or Notary

I, \_\_\_\_\_, HEREBY APPOINT THE CLERK OF THE VILLAGE OF NEW GLARUS AS MY AGENT TO ACCEPT SERVICE OR PROCESS IN ANY CIVIL ACTION BROUGHT AGAINST ME ARISING OUT OF ANY SALE OR SERVICE PERFORMED BY ME IN CONNECTION WITH MY DIRECT SALES ACTIVITIES, IF I CANNOT, AFTER REASONABLE EFFORT BE SERVED PERSONALLY.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

WITNESS: \_\_\_\_\_

Clerk-Treasurer / Deputy Clerk-Treasurer  
Chief of Police, or Notary

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**MOBILE FOOD VENDOR APPLICATION CHECKLIST:**

- \_\_\_ 1. Completed Mobile Food Vendor permit application.
- \_\_\_ 2. Driver's license or some other proof of identity.
- \_\_\_ 3. A state health officer's certificate.
- \_\_\_ 4. Written authorization from a landowner to the 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.
- \_\_\_ 5. Certificate of Insurance for proof of general liability insurance naming the Village of New Glarus as an additional insured
- \_\_\_ 5. Permit fee payment (\$100/year or \$50 for 3 days).

