



MOBILE FOOD AND/OR BEVERAGE VENDOR'S
PERMIT APPLICATION

Application is hereby made for a MOBILE VENDOR'S PERMIT
to operate in the City of Arcadia, Florida

Vendor Name: _____ Phone: _____

Vendor's Address: _____

Phone Number: (_____) _____

Business Name: _____ Phone: _____

Address: _____

Vendor's SSN: _____ - _____ - _____ Birthdate: ____/____/____

Gender: () Male () Female ()

Driver's License # _____ State: _____ Tag # _____

Type of Food and/or beverage to be sold: _____

Location where the food is prepared: _____

The following items must accompany this application, if required:

1. Copy of Food Safety inspection Report (Issued by FDACS)
2. Fire Marshal's current approved inspection report.
3. Proof of Public & Property Damage Liability insurance (min 100/300K) bodily injury each person, 50K property damage
4. \$50.00 fee. Each additional vehicle - \$20. (if permit is denied, this fee is refundable)
5. Completed indemnification form
6. For unincorporated fictitious names, proof must be attached showing that it has been recorded or intention to record.

(Signature of Applicant)

(Title: Vendor, Owner, Agent...)

Remarks:

INDEMNIFICATION & HOLD HARMLESS

I, _____, as _____ of
(Printed Name) (Title or Office Held)

_____, do hereby agree to hold the City of Arcadia,
(Club, organization, group, etc)

its agents and employees, harmless and indemnify same from any civil actions or claims of any nature made in connection with the event known as the _____ to
(Name of Event)

be held at _____ on _____.
(Location) (Date)

By: _____
(Signature)

Printed Name: _____

Entity Name: _____

Its: _____

Date: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to and subscribed before me this ____ day of _____, 2010, by _____, as _____ of _____ who [] is personally known to me or [] has produced _____ as identification.

NOTARY PUBLIC

(SEAL)