



BUSINESS LICENSE DIVISION

Neighborhood Resource Center

Unified Government of Wyandotte County/ Kansas City, Kansas

4953 State Avenue, Kansas City, Kansas 66101

p. (913) 573-8780 | f. (913) 573-8622 | www.wycokck.org/businesslicense

Office Use 1-20

Parent Record # _____

STREET/SIDEWALK VENDOR LICENSE APPLICATION

☐ **Annual Fee \$100.00** Jan. 1-Dec. 31

☐ **Special Event (\$20.00 2days, \$30.00 3-10 days)**

Occupation Tax \$ _____

Sale Dates: _____

Application Date: _____

Owners Name: _____

Owners Address: _____

Mailing Address: _____

Telephone Number: _____

Ownership Type ☐ Individual ☐ Partnership ☐ Corporation ☐ LLC

(If Corporation or LLC is selected include Articles of Incorporation or Organization, if Partnership is selected provide complete list of all partners, including phone and address.)

Sales will be conducted from ☐ Vehicle ☐ Cart ☐ Tent

Vending of prepared and packaged ice cream, ice cream product, frozen dessert items, and other similar food items **is prohibited from pushcarts.**

Proposed location of vehicle, cart or tent (provide address, detailed description, and map showing specific location). _____

_____**(INITIAL)** **Requirements of Unified Government Ordinance, Sec. 32-188. - Mobile vending.** I

understand and agree that, by Unified Government ordinance mobile vendor vehicles or prepared food vending vehicles may operate from 8:00 a.m.—7:00 p.m. Sunday through Thursday and 8:00 a.m.—8:00 p.m. Friday and Saturday. I further understand and agree that by ordinance, mobile vending vehicles and prepared food vending vehicles may not park for more than four hours at any one site. By my initials here and my signature at the end of this application, I certify that I have read and understand the Unified Government's ordinance as it pertains to mobile vending. I further certify that I understand that if I do not comply with state and local law regarding mobile vending, my license to operate a mobile vendor vehicle or prepared food vending vehicle may be revoked.

Provide photograph of vehicle or cart, and describe the nature, size, and manner of construction.

Provide a complete list and description of all food items to be sold (attach separate sheet if necessary). Non-food items, or food items not stated here, cannot be sold.

Provide a complete list of all persons that will handle or sell goods from licensed vehicle, or cart, to include name, address, and telephone number (attach separate sheet if necessary). No other person is allowed to handle or sell goods.

Will liquid petroleum or propane gas be used on or near the vehicle or cart?

☐ Yes ☐ No If yes, attach proof of Fire Department inspection and approval.

Kansas State Sales Tax Identification Number _____

Proof of inspection and approval by the Kansas Department of Health and Environment (prepared foods), or Wyandotte County Health Department (prepackaged foods) must accompany this application.

A certificate of comprehensive general liability insurance with limits of not less than \$100,000.00 for death of or injury to one person, \$300,000.00 for death of or injury to more than one person, and \$25,000.00 for property damage, per occurrence, shall accompany this application, and must provide that 10 days prior notice be given to the License Administrator in the event of cancellation.

Applicant agrees the city shall be an additional named insured on the aforementioned insurance policy, as required by ordinance for the completion of this license and has provided a certificate of insurance indicating such coverage.

Each unit must clearly display the license, all permits, the name and telephone number of the licensee, and the telephone number of the License Administrator.

By my signature I certify that I have received, read, and understand the contents of the Streets and Sidewalks Ordinance relating to vending, and agree to abide by the contents thereof:

Signature

Date

Subscribed and sworn by me this _____ day of _____ 20____

Notary Public _____