



MOBILE FOOD UNIT (MFU) – LICENSE APPLICATION

Licenses are issued on an event basis and permit MFUs to operate for a designated period of time as defined in the application. **Applications and payment must be submitted to the City of Wyoming no later than Wednesday prior to the event.** All applications received after this date will not be issued. No exceptions. Completed applications can be submitted to City Hall or emailed to: wyoing@wyomingmn.org.

1. APPLICANT INFORMATION

Business Name: _____

Applicant's Legal Name: _____

Phone Number: _____

Email: _____

Driver License Number: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Is this your permanent address? Yes No If no, please provide permanent address:

Permanent Address: _____

City: _____ State: _____ Zip: _____

2. LICENSE TYPE

The City of Wyoming offers Mobile Food Truck Licensing depending on the need of the vendor. Please indicate the type of license that you are applying for and include the cost of the License with your application when returning to City Hall.

Daily License (\$50) Each additional day(s) require a fee of \$20.00/day

Monthly License (\$100)

6-12 month License (\$150)*

*A License that is for 6-12 months must be reviewed and approved of by the Wyoming City Council.

3. FOOD AND LOCATION

Describe the food that will be sold:

Are you licensed by the MN Health Department? Yes No *Please provide a copy of license.

List the address and describe the location(s) where food will be sold:

The applicant has my permission to sell on my property:

Property Owner Printed Name

Property Owner Signature

Date

Vehicle description:

Make: _____ Model: _____ Year: _____ Color: _____ Plate: _____

Certificate of insurance attached: Yes No

List the hours and dates you will be in operation:

4. CRIMINAL BACKGROUND

Have you ever been convicted of a crime, misdemeanor, or violation of any ordinances related to this type of business? If so, provide details, location(s), and date(s):

5. PREVIOUS LICENSES HELD

Please list the last municipalities, including state and dates worked, where you have conducted this business:

1. _____
2. _____
3. _____

7. PAYMENT

Payments: Applications and payment must be submitted to the City of Wyoming no later than Wednesday prior to the event. Payments can be made in person at Wyoming City Hall during normal business hours. Payments can also be done by mail or by phone:

Check	Credit Card Payment	Cash:
<i>Mail Payment to:</i> Wyoming City Hall Attn: Food Truck Licensing 26885 Forest Blvd PO Box 188 Wyoming, MN 55092	<i>To make payment by phone, please call:</i> 651-462-0575 **Additional charge for use of credit cards	<i>Cash payments made in person:</i> Wyoming City Hall 26885 Forest Blvd PO Box 188 Wyoming, MN 55092 <i>**Please note City offices ore open weekdays between 8:00am-4:30pm Closed on the weekends.**</i>

6. APPLICANT SIGNATURE:

- I have fully read and understand city code regarding Mobile Food Units (MFU) in its entirety, and agree to respect and obey all regulations of Wyoming's city code regarding the regulations with regard to MFU

Signature of Applicant

Date

NOTICE TO APPLICANT:

In the course of your application for a license under Wyoming’s General Licensing requirement, you may be asked to supply non-public data. The purpose and intended use of this data is to provide a means for the City to evaluate whether you comply with the application requirements for the general license application. You may refuse to supply the requested data, but this may result in an incomplete application which may result in your application being denied. This non-public data may be reviewed by the City of Wyoming, employees of the City of Wyoming who are assigned to review such information, and the City of Wyoming’s legal consultant. In addition, this data may be reviewed by specific advisory boards and subcommittees of the City of Wyoming, who assist the City in evaluating your application. You hereby agree to release the data to those boards and subcommittees for the purpose of effectuating that review.

Failures to complete, supply, or falsify any or all information contained within this application will result in a delay or denial or revocation of your license and/or application.

The undersigned, an applicant for a license under the rules and regulations of the City of Wyoming, understands and consents to the release and use of private or confidential data, as described above and acknowledges receipt of a copy of excerpts of City Code, Chapter 4, Public Protection and General Licensing.

Also, the undersigned does hereby agree to defend, indemnify, and hold harmless, the City of Wyoming, its officers, employees and agents, for any and all claims, causes of action, lawsuits, losses or expenses, including reasonable attorney’s fees and costs, on account of bodily injury, sickness, disease, death, and property damage as the result of any action of the undersigned.

Applicant Signature

Date

Staff Use Only:

Date App. Received:	Amount Paid:	Receipt No.:
Council Meeting Date:	Approved Dates:	Permit Number:
Issued Date:	Staff Signature:	