



# VILLAGE OF WALWORTH

## MOBILE FOOD TRUCK & VENDOR APPLICATION

**FEE: \$250.00 ANNUALLY**  
*Village of Walworth Ordinance Section 7-13*

**PLEASE ATTACH THE FOLLOWING WHEN FILLING OUT YOUR APPLICATION:**

1. Copy of any and all health department permit(s) under which the applicant will be operating.
2. Copy of certificate of insurance showing auto liability insurance (if applicable) in the minimum amount of \$1,000,000.00 per occurrence combined single limit and commercial general liability insurance in the minimum amount of \$1,000,000.00 per occurrence/\$2,000,000.00 aggregate. The Village shall be named as an additional insured.
3. Recent photographs of the proposed mobile food truck, cart, container or any like object for the mobile food vendor, showing at a minimum, the cart, object or mobile food truck's front, rear, and both sides, with service window closed and open, which shall be used for identification verification.
4. Proof of lighting so that flashing will be visible at a distance of 500 feet whenever the mobile food truck is stopped on a public way or public property for the purpose of vending. In this proof, a sign on the side of the mobile food truck shall be visible and consist of letters no less than three inches in height, and shall state the name, telephone number of the owners of the vehicle, and an identification numeral distinguishing the vehicle.
5. Copy of current, valid, registration of the vehicle, trailer, pushcart, or any like object intended to deliver food.
6. Copies of valid driver's license for any person who will be driving and/or working the mobile food truck.
7. Business narrative explaining the operations of the business, including, but not limited to, hours of operations, days of operations, anticipated location of operations, number of employees, any sound amplification which may be used, and any other information which may be requested by the Village in order to make a full and comprehensive evaluation of the application.
8. If the mobile food vendor is to be located on private property, attach a detailed site plan.
9. Dimensions of the vehicle, trailer, push cart, or any object used to deliver food.

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**\*\* ALL PARTIES WILL BE SUBJECT TO A BACKGROUND CHECK \*\***

**Please complete one of the attached Background Check Authorization Forms per individual.**

Name of Applicant/Entity: \_\_\_\_\_

(If the applicant is a separate corporate entity, LLC, LLP, or any other business entity, the names and addresses of all parties holding any interest in the entity shall also be provided.)

Name of Responsible Party: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State & Zip: \_\_\_\_\_

227 N. Main Street  
PO Box 400  
Walworth, WI 53184  
(262) 275-2127

Names, current addresses and phone number of any person who will be working in the mobile food truck or in conjunction with the mobile food vendor:

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The applicant for her/himself and for other persons, organizations, firms and corporations, if any listed in this application, being of sound mind and body, do hereby freely, voluntarily and knowingly, now and for all times, fully save and hold harmless and defend the Village of Walworth, a Wisconsin Municipal Corporation located in Walworth County, and each and every one of its elected and appointed officials, employees, representatives, agents, heirs, and assigns, jointly and severally from and against any and all claims, causes of action, actions, liabilities, demands, losses, damages, and/or expenses of whatsoever kind and nature including counsel or attorneys' fees, which I have or may, at any time, incur or sustain arising from, resulting from, incurred consequence of, or pertaining to, any and all intentional and negligent acts, omissions, incidents, activities and transactions, of whatever kind and nature, direct or indirect, or mine own and those of or by the Village of Walworth, and each and every of its elected and appointed officials, employees, representatives, and agents, regardless of when or where, occurring or arising from this event.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

***For Office Use Only***

Amount Paid: \_\_\_\_\_ Received Of: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Background Checks:       APPROVED       DENIED

Date Reviewed by Clerk/Deputy Clerk: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Permit Issued: \_\_\_\_\_

227 N. Main Street  
PO Box 400  
Walworth, WI 53184  
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## VILLAGE OF WALWORTH BACKGROUND CHECK AUTHORIZATION FORM

**\*\* Please attach copy of Driver's License \*\***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Length of time at this address: \_\_\_\_\_

If less than three (3) years, previous address: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

I am the person named above; the information above is truthful. My signature on this form grants the Village of Walworth permission to run a criminal background check on me. I understand that certain findings will restrict my ability to operate a Mobile Food Truck in the Village of Walworth.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date