



**OFFICE OF THE CITY CLERK**  
**Policy, Gaming & Licensing**  
350 City Hall Square West - Suite 110  
Windsor, ON N9A 6S1  
Ph: 519-255-6200, Option 1 Fax: 519-255-6868  
www.citywindsor.ca

**MOBILE VENDOR OF FOOD APPLICATION**

OFFICE USE ONLY

LICENCE # \_\_\_\_\_

**CLASS 3 (MOTORIZED) – (2 PAGES)**

**APPLICANT NAME AND ADDRESS**

APPLICANT NAME:		DATE OF BIRTH:	(MM/DD/YYYY)
STREET ADDRESS:		HOME PHONE:	
		CELL PHONE:	
CITY, PROVINCE:		POSTAL CODE:	

**BUSINESS NAME AND ADDRESS**

NAME UNDER WHICH BUSINESS OPERATES:		PLEASE INDICATE WITH A CHECK MARK:(√) Corporation    Sole Proprietorship    Partnership <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
STREET ADDRESS:		BUS. PHONE:	
		EMAIL ADDRESS:	
CITY, PROVINCE:		POSTAL CODE:	

**MAILING ADDRESS FOR BUSINESS, IF DIFFERENT THAN ABOVE:**

STREET ADDRESS:		CITY, PROVINCE:	
		POSTAL CODE:	

LICENCE CATEGORY		LICENCE FEES	
MOBILE VENDOR OF FOOD	CLASS 3	NEW - \$239.00/Each	RENEWAL- \$239.00/Each
	CLASS 3, with on-board kitchen	NEW - \$414.00/Each	RENEWAL- \$414.00/Each
	TOTAL # OF STRUCTURES	NEW - \$10.00/Each	RENEWAL - \$10.00/Each

HAVE YOU EVER HAD ANY PREVIOUS MUNICIPAL LICENCE(S)?  
YES ☐ NO ☐ IF YES: What type? \_\_\_\_\_  
  
What year? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OR INDICTABLE OFFENCE IN CANADA OR ANY OTHER COUNTRY?  
YES ☐ NO ☐ IF YES: Year? \_\_\_\_\_  
  
Location? \_\_\_\_\_

**PLEASE ENCLOSE THE FOLLOWING DOCUMENTS WITH THIS APPLICATION:**

	Certificate of Incorporation including Directors, if applicable		Business Name Registration / Franchise Agreement, if applicable
	Police Clearance (issued by the municipality where you reside, not older than 30 days, new only)		Vehicle Ownership & Safety Standards Certificate
	Proof of Commercial General Liability Insurance (Minimum \$2,000,000)		Motor Vehicle Liability Insurance Card- "pink slip"
	Food Handler's Certificate		Propane Approval, if applicable
	Windsor/Essex Board Of Health Inspection (519-258-2146)		
	Proof of Work Status	(2) pieces of government-issued identification including one photo I.D. as well as one I.D. demonstrating proof of status in Canada (e.g. birth certificate, Canadian passport, Canadian citizenship card, permanent resident card, work permit, etc.	
	Valid Photo Identification		

**LOCATION WHERE VEHICLE WILL BE PARKED:**

STREET ADDRESS:		CITY, PROVINCE:	
		POSTAL CODE:	

**THE LICENCE RENEWAL DEADLINE IS JANUARY 31<sup>ST</sup> ANNUALLY. A 50% LATE PENALTY IS ADDED TO THE BUSINESS LICENCE FEE ON FEBRUARY 1<sup>ST</sup>. THE APPLICANT COULD FACE FURTHER PENALTIES/FINES FOR OPERATING WITHOUT A VALID BUSINESS LICENCE.**

**NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION**

I acknowledge that the information requested on this form and any appendices attached are collected under the authority of the Municipal Act, City of Windsor Act, and City of Windsor Licensing By-law 395-2004. This information is required in order to process, issue, monitor, regulate and investigate the various licenses issued by the Office of the City Clerk, Policy, Gaming & Licensing Division. The name and business address of the licensee is public information. Any other personal information collected will only be used for investigative purposes. Questions regarding this collection can be made to the Supervisor of Licensing, 350 City Hall Square W. Suite 110, Windsor, ON N9A 6S1, 519-255-6200.

DATE (MM/DD/YYYY)

SIGNATURE OF APPLICANT & TITLE



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### MOBILE VENDOR OF FOOD APPLICATION

### CLASS 3 – (MOTORIZED) – PAGE 2

CLASS 3

MOTORIZED VEHICLE – IF YOU ARE RENEWING MORE THAN 10 VEHICLES YOU MUST USE A SEPERATE SHEET WITH SEPERATE PAYMENT.

CITY PLATE #	YEAR	MAKE/MODEL	PROVINCIAL PLATE#	VIN #	ON-BOARD KITCHEN? (Y/N)

#### PARTICULARS OF INSURANCE

INSURANCE LIABILITY	\$	EXPIRY DATE (MM/DD/YYYY)	
INSURANCE COMPANY		POLICY NUMBER	
PLEASE LIST THE NUMBER AND TYPE(S) OF STRUCTURE(S) USED ON A PUBLIC RIGHT-OF-WAY IN CONJUNCTION WITH THE OPERATION OF THE MOBILE VEHICLE.			
	NUMBER OF REFUSE CONTAINERS		NUMBER OF BEVERAGE COOLERS
	NUMBER OF CHAIRS		NUMBER OF TABLES

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