

# CITY OF CUBA

## MOBILE FOOD TRUCK / FOOD VENDOR APPLICATION

NAME OF OWNER/ BUSINESS: \_\_\_\_\_

OWNER CELL PHONE NUMBER: \_\_\_\_\_

OWNERS ADDRESS: \_\_\_\_\_

NAME OF APPLICANT (IF DIFFERENT FROM ABOVE): \_\_\_\_\_

LICENSE PLATE FOR VENDORS TRUCK (IF APPLICABLE): \_\_\_\_\_

MENU ITEMS (IF THEY CHANGE DAY TO DAY, PLEASE LET US KNOW):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE(S) AND TIME(S) REQUESTED:

\_\_\_\_\_

\_\_\_\_\_

MUST PROVIDE TO THE CITY OF CUBA:

1. COPY OF FULTON COUNTY FOOD HANDLER'S/ MANAGER LICENSE
2. COPY OF FULTON COUNTY HEALTH CERTIFICATE
3. COPY OF LIABILITY INSURANCE \$300,000/ PERSON, \$500,000 PER OCCURRENCE, \$15,000 PROPERTY DAMAGE
4. FEE OF \$25.00 AN EVENT-NOT TO EXCEED \$250.00 FOR THE YEAR (JAN-DEC)
5. COPY OF DRIVER'S LICENSE OF ANY EMPLOYEE & OWNER

PLEASE RETURN THIS INFORMATION TO THE CITY CLERK AT 403 E JEFFERSON STREET, CUBA IL 61427 OR EMAIL TO [CITYCLERK@CITYOFCUBAIL.COM](mailto:CITYCLERK@CITYOFCUBAIL.COM) AT LEAST 3 DAYS IN ADVANCE OF THE EVENT.

THE FEE SHOULD BE MADE PAYABLE TO: CITY OF CUBA AND HAND DELIVERED OR MAILED TO THE CITY CLERK AT P.O BOX 19 CUBA, IL 61427

AFTER APPROVAL FROM THE CITY COUNCIL A LICENSE WILL BE GIVEN TO YOU TO DISPLAY.

IF YOU HAVE ANY QUESTIONS, CONTACT CITY HALL AT 309-785-5093

\*ATTACHED IS ORDINANCE # 2018-08-0058 AND THE (REVISED) ORDINANCE # 24-03-025 PLEASE READ!

APPLICANT/OWNERS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_