

# Village of Pardeeville Application for Mobile Food Establishment Permit

**\$50.00 quarterly non-refundable**

Date of Application: \_\_\_\_\_

License Expiration Date: \_\_\_\_\_, \_\_\_\_\_

It shall be unlawful for any Mobile Food establishment to engage in sales within the Village of Pardeeville without being licensed for that purpose.

I further understand that this license is not transferable and that a copy of my driver license is required.

Conditions of permit:

1. Permit will be for one day per week per vendor (week is defined as Sunday – Saturday)
2. Vendor must be located on private property with owners' approval or Municipal Park/Lot with Village approval
3. Village may deny permits for dates that fall on the date(s) registered special events in the Village.
4. Permit can be revoked for violating any provisions of the permit or issues that arise.

Name of Firm, Association, or Corporation		Telephone Number	
Manager's Name			
Business Address	City	State	Zip

Name of Applicant – Include Middle Initial		Date of Birth	
Permanent Address	City	State	Zip
Temporary Address (if applicable)	City	State	Zip
Telephone Number	Temporary Telephone Number (if applicable)		
Vehicle Make	Model	License Plate Number	
Driver License Number (copy required)	State Issued		

Description of all food items to be offered for sale:

Address or location of sales **in the Village of Pardeeville** and telephone number, if applicable:

Dates and times of sales:

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Required document copies (please submit with application):

- Wisconsin driver license or other proof of identity containing a photograph of the applicant.
- Wisconsin certificate of examination and approval from the sealer of weights and measures for each device utilized, if applicable.
- Current, valid Wisconsin Seller's Permit.
- Current auto insurance declaration page for coverage in force for the entire license period.
- Current proof of liability insurance in an amount no less than \$300,000 per incident.
- Current mobile food establishment permit issued by the \*Wisconsin Department of Health Services.
- Current service base permit issued by the \*Wisconsin Department of Health Services.  
\*Or its designated agent such as Dane County Public Health Department or WI Department of Agriculture, Trade and Consumer Protection.

Have you ever been convicted of any crime or ordinance violation related to food service within the last five (5) years

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, describe nature of offense:

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Place of conviction: \_\_\_\_\_

The undersigned declares the above information is true and complete. If the Village subsequently learns the information provided is untrue or incomplete, the license is subject to revocation.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

If selling at a fixed, private location, signature of property owner or manager giving applicant permission to be at location:

\_\_\_\_\_  
**Signature of Village of Pardeeville Property Owner/Manager**

\_\_\_\_\_  
**Date**

If selling at a public location, signature of Village Staff giving applicant permission to be at location:

\_\_\_\_\_  
**Signature of authorized Village Staff**

\_\_\_\_\_  
**Date**

Payment Received : \_\_\_\_\_

Information checked: \_\_\_\_\_

Approval of Village Clerk

Date

License Issue Date: \_\_\_\_\_

License Number: \_\_\_\_\_