

DEPARTMENT OF INSPECTIONS, PERMITS, AND LICENSES

444 South Fifth Street, Suite 200
Louisville, KY 40202-4314
502-574-3321

APPLICATION FOR VENDOR PERMIT

Stationary/Sidewalk Mobile Mobile Food Unit Peddler Temporary

NAME OF APPLICANT _____

D/B/A: _____

BUSINESS ADDRESS _____ ZIP _____

CONTACT PERSON _____

HOME ADDRESS _____ ZIP _____

BUSINESS PHONE _____ HOME PHONE _____

LOCATION(S) _____ HOURS OF OPERATION _____

PLEASE ATTACH SEPARATE SHEET FOR MULTIPLE LOCATIONS (FOOD TRUCKS ONLY)

REVENUE COMMISSION NUMBER _____ KY STATE SALES & USE TAX NUMBER _____

HAS THE APPLICANT EVER BEEN DENIED A LICENSE OR HAD A LICENSE SUSPENDED OR REVOKED? YES _____ NO _____

****IF YES, PLEASE ATTACH A WRITTEN EXPLANATION****

LIST OF ITEMS TO BE VENDED _____

EQUIPMENT/VEHICLE INFORMATION

TYPE OF EQUIPMENT/VEHICLE TO BE USED _____

LENGTH OF CART _____ DEPTH _____ HEIGHT W/O UMBRELLA _____ HEIGHT OF UMBRELLA _____

VEHICLE _____ YEAR: _____ MAKE: _____ MODEL: _____

INSURANCE INFORMATION _____

WILL YOU HAVE EMPLOYEES AT THE REQUESTED LOCATION? YES ___ NO ___

IF YES, PLEASE SPECIFY THE NUMBER OF EMPLOYEES AND THEIR NAMES: NUM OF EMPLOYEES _____

LICENSEE HEREBY AGREES THAT IT WILL INDEMNIFY AND HOLD THE CITY OF LOUISVILLE, ITS OFFICERS, EMPLOYEES AND AGENTS HARMLESS FROM ANY AND ALL CLAIMS OF DAMAGE TO PERSON(S) OR PROPERTY WHICH MAY RESULT FROM THE ACTIVITIES PERMITTED HEREUNDER, AND SHALL, IF REQUESTED, FURNISH CORPORATE SURETY OR PROOF OF INSURANCE FOR SUCH INDEMNITY AND IN SUCH MANNER AND AMOUNT AS MAY BE DEEMED REQUISITE.

IT IS UNDERSTOOD THAT FOR REASONS OF SAFETY OR TRAFFIC FLOW, ANY LAW ENFORCEMENT OFFICER MAY MOVE LICENSEE OR HIS/HER AGENT FROM SPECIFIED LOCATION.

PERMIT APPLIED FOR AND ALL TERMS AND STIPULATIONS AGREED TO BY:

SIGNATURE

TITLE

DATE