

MOBILE VENDOR APPLICATION

PLEASE CHECK THE APPLICABLE PERMIT TYPE BELOW

____ MOBILE VENDOR -TEMPORARY PERMIT

MOBILE VENDOR -FIXED PERMIT

Please fill out this form completely, supplying all necessary information and documentation to support your request. Your application will not be considered complete or processed for review until all necessary information is furnished. *An application fee of \$50.00 for a Temporary Permit or \$100.00 for a Fixed Permit is required at the time of submission.*

Application:

Proof of identity and a full-face photograph (at least 2 in., not more than 3 in.) of the applicant is required.

Applicants Full Name:	
Address:	
E-mail:	
Phone:	
If the applicant is employed by another: Business/Vendor Name:	
Business/Vendor Name:	

<u>A detailed site plan showing proposed location and distances in compliance with</u> <u>Section 38-61(d)(3) of the City of Rogers Code of Ordinances is required.</u>

Vending Location/Address:

If the outdoor vendor location is adjacent to a residential district, proof of notification of adjacent property owner (i.e. certified mail receipt or letter from the owner) is required.

Product for Sale or Service Offered (Describe):

1. Food/ Beverage: (attach a menu if available)

2. Product: _____

Products for sale by permanent businesses located immediately adjacent to and on the same side of the street:

Permanent Business Name	Address	Products for Sale (attach a menu if available)
Description of Mobile Device or oth	er structure to be utilized for co	onducting the business:
If a motor vehicle is being used prov	, in the second s	
*Proof of current driver's license for *Proof of current insurance for the		
Make Year	Model	License No
Square Feet of Mobile Device or Str	ucture:	
Description of any additional structu stairs, decks, tents, or enclosures: (fo		ne business, including but not limited to c.)
and location of any propos	wing or photo of the conveyar ed signs is required. All signar -9 of the City of Rogers Code	ge must be in compliance with
Number of parking spaces on the pro-	operty:	
Describe parking on the property (i.e	e., shared parking lot, vacant pa	arcel, etc.)
Arkansas Sales and Use Tax ID Nun	ıber:	
Date of inspection by the Benton Co	unty Health Department (attac	h a copy of the certificate):

APPLICANT / VENDOR: I certify under penalty of perjury that the foregoing statements and answers herein made, all data, information, and evidence herewith submitted are in all respects, to the best of my knowledge and belief, true and correct. I understand that submittal of incorrect or false information is grounds for invalidation of application completeness, determination, or approval. I understand that the City of Rogers might not approve what I am applying for, or might set conditions of approval.

NAME (PRINTED):	Date:
Signature:	

PROPERTY OWNER(S): I/we certify under penalty of perjury that I am/we are the owner(s) of the property that is the subject of this application and that I/we have read this application and consent to its filing. Further, I/we certify that permission is hereby given to the applicant/vendor listed above for the operation of an Outdoor Mobile Vendor business on the subject property, as described herein.

NAME (PRINTED):	Date:
Signature:	
Staff Use Only	
Number of Parking Spaces required for the mobile vendor	
Is adequate parking provided? (explain if needed):	
Zoning District:	

Administrative Approval

For the purposes of Sec. 38-61 of the City of Rogers Code of Ordinances, it shall be unlawful to open for business until a permit has been issued by the City Planning Department. Approval of this application shall confirm that the proposed use conforms to the requirements of the City's zoning code. The permit for outdoor vending on private property is hereby approved, and is valid for the time period noted below.

Start Date: _____

End Date: _____

Zoning & Development Administrator

Date