



CITY OF DECATUR
FINANCE DEPARTMENT
#1 GARY K ANDERSON PLAZA
DECATUR IL 62523
LICENSING – (217) 424-2709

FEE: (see Ch 55.1)
Mobile Food Unit \$50
Temp Vendor Stand \$50
Food & Bev Cart \$50

License Term:
January 1 to December 31

**MOBILE FOOD UNIT, TEMPORARY VENDOR STAND, FOOD & BEVERAGE CART
LICENSE APPLICATION**

Circle one: Mobile Food Unit Temporary Vendor Food & Beverage Cart

Circle one: New Renewal

Circle one: Individual Owner Partnership Corporation LLC

PLEASE PRINT

Business Name _____
Name of Individual Owner, Partnership, Corporation or LLC

Doing Business As _____ Phone # _____

Business Address _____
Street City State Zip Code

Mailing Address _____
Street City State Zip Code

Proposed locations for operation:

1. Address _____
Street City State Zip Code

2. Address _____
Street City State Zip Code

Hours of Operation (if 2 locations, need hours at each location)

Does applicant operate an existing restaurant within the City of Decatur? ____ Yes ____ No

Is an outside source for power needed (if yes, a permit is required): ____ Yes ____ No

Is there a need for outdoor cooking (if yes, City consent required): ____ Yes ____ No

CONTINUE ON SECOND PAGE

TO BE COMPLETED BY FINANCE DEPT.

City Manager or Designee

Date

New ____ Renewal ____

Amount Paid \$ _____

Date Paid _____

License Number _____

License Issued _____

Names and Addresses of Owners, Partners, Officer, Director, and Shareholder:

Name	_____	DOB	_____	Title	_____
	First	MI	Last		
Address	_____	_____	_____	_____	Phone # _____
	Street	City	State	Zip Code	
Name	_____	DOB	_____	Title	_____
	First	MI	Last		
Address	_____	_____	_____	_____	Phone # _____
	Street	City	State	Zip Code	
Name	_____	DOB	_____	Title	_____
	First	MI	Last		
Address	_____	_____	_____	_____	Phone # _____
	Street	City	State	Zip Code	
Name of Manager	_____	_____	_____	Date of Birth	_____
	First	MI	Last		
Address	_____	_____	_____	_____	Phone # _____
	Street	City	State	Zip Code	

Required documents:

- Driver's License or ID card for all listed
- Printed Picture of unit/stand/cart – must have business name
- Authorized permission for locations
- Certificate of Insurance with City of Decatur as additional insured
- Copy of Macon County Health Department permit
- Copy of Illinois Department of Revenue Certificate of Registration
- Copy of Vehicle Registration – for Mobile Food Units
- Permit if outside power source is required
- Approval if outdoor cooking is to be used
- Record of Sales (for renewals)

Food & Beverage Tax requirements:

The purchase of beverage and food prepared for the immediate consumption at retail in the City of Decatur is subject to a tax in addition to any and all other taxes, per City Code Chapter 51.2. Registration with the Department of Finance is required.

Business Name _____
Name of Individual Owner, Partnership, Corporation or LLC

Doing Business As _____ Phone # _____

THE UNDERSIGNED, BEING FIRST DULY SWORN, ON OATH DEPOSES AND SAYS:

1. That he/she has personal knowledge of the facts relative to this application and that the matters and things set out in this application are true and he/she is duly authorized to and does sign this application on behalf of said business. _____
2. That he/she understands and agrees to comply with the requirements of Chapter 55.1, Mobile Food Units, Temporary Vendor Stands, and Food and Beverage Carts, and Chapter 51.2, Food and Beverage Tax, of the City Code. _____
3. That no owner, partner, officer, director, or shareholder of the business to be licensed has ever been convicted with in the last five years of a theft, burglary, fraud, criminal sexual assault or criminal sexual abuse, or offenses involving violence against another person. _____
4. That no owner, partner, officer, director, or shareholder of the business to be licensed has ever had a license issued pursuant to Chapter 55.1 revoked for cause. _____
5. That he/she agrees to indemnify and save the City of Decatur, Illinois, it's officers, agents, and employees harmless against any and all loss, damage, or expense that may be sustained as a result of any suits, actions, or claims of any character brought on account of property damage, injury to, or death of any person or persons, which may be occasioned by any activity carried on under the terms of this license.

Signed _____

Title _____

Subscribed and sworn to before me this _____ day of _____, 20_____

NOTARY PUBLIC

(Seal)