



MOBILE FOOD VENDOR LICENSE APPLICATION

**City of Burlington
400 Washington Street
Burlington, IA 52601**

Katie Music, CMC - City Clerk

(319) 753-8124

Effective Date: _____ to _____

Location of Sale (one location per license): _____
(Attach drawing of location. Drawing will show distance to property lines, and public and private right-of-ways. Any business conducted in public right-of-way must also have an approved encroachment permit.)

Applicant Name: _____

Applicant Address: _____
address city state zip

Business Name: _____

Business Address: _____
address city state zip

Phone No.: _____ Email Address: _____

By my signature, I hereby certify that the above information is true and complete to the best of my knowledge and belief:

Signature of Applicant: _____ Date: _____

Approval: _____ Date: _____

Eric Tysland, Development & Parks Director

Encroachment agreement needed? Yes No

Comments:

City Clerk Approval: _____

Katie Music, CMC - City Clerk

Approved and Issued: _____