



MAYOR AND CITY COUNCIL OF LAUREL
OFFICE OF THE FIRE MARSHAL AND PERMIT SERVICES

8103 Sandy Spring Road Laurel, Maryland 20707-2502
Phone: (301) 725-5300 FAX (301) 490-5068
Web: <http://www.cityoflaurel.org> Email: fmpr@laurel.md.us



MOBILE FOOD VENDOR LICENSE

DATE OF APPLICATION: _____

EXPIRATION DATE: _____

ALL ITEMS BELOW MUST BE COMPLETED. FAILURE TO PROVIDE FULL AND ACCURATE INFORMATION CAN RESULT IN APPLICATION REJECTION AND/OR DENIAL. ATTACH THE FOLLOWING TO THIS APPLICATION: (1) PROOF OF IDENTITY, ISSUED BY THE STATE OF MARYLAND OR OTHER RECOGNIZED GOVERNMENT (2) A COMPLETE LISTING OF ANY OTHER LICENSES OR PERMITS ISSUED TO THE APPLICANT BY THE CITY WITHIN THE FIVE (5) YEARS PRECEDING THE DATE OF THIS APPLICATION.

PLEASE PRINT CLEARLY

APPLICANT INFORMATION

APPLICANTS NAME: _____

APPLICANTS ADDRESS: _____

MD STATE DRIVERS LICENSE/ID NUMBER: _____

APPLICANTS TELEPHONE NUMBER: () _____ - _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? YES OR NO
(CIRCLE ONE)

LICENSEE INFORMATION

LICENSEE COMPANY NAME/LICENSEE NAME: _____

LICENSEE ADDRESS: _____

VEHICLE INFORMATION (IF APPLICABLE)

VEHICLE IDENTIFICATION NUMBER: _____

VEHICLE TAG NUMBER: _____

MAKE OF VEHICLE: _____ MODEL OF VEHICLE: _____

YEAR OF VEHICLE: _____

PRODUCTS/SERVICES TO BE SOLD INFORMATION

DESCRIPTION OF PRODUCTS/SERVICES TO BE SOLD: _____

SPECIFY LOCATION WHERE ITEMS WILL BE SOLD (IF APPLICABLE): _____

I DO SOLEMNLY DECLARE AND AFFIRM, UNDER THE PENALTIES OF PERJURY, THAT I, THE OWNER, OR AGENT OF THE OWNER AUTHORIZED TO APPLY FOR THIS LICENSE, HEREBY CERTIFY THAT THE APPLICATION AND CONTENTS ARE TRUE AND CORRECT, THAT ALL ACTIVITIES PERFORMED UNDER THIS LICENSE WILL BE IN ACCORDANCE WITH CHAPTER 8, ARTICLE V, SECTIONS 8-51 THROUGH 8-55 OF THE CODE OF THE CITY OF LAUREL MARYLAND.

SIGNATURE OF APPLICANT: _____

Office Use Only:	
LICENSE FEE DUE:	= \$ <u> \$100.00 </u>
REPLACEMENT OF LOST OR MUTILATED LICENSE (CIRCLE ONE): \$25.00 EA.	\$ _____

PROHIBITED ACTS AND OTHER CONDITIONS:

1. OPERATING HOURS UNDER THIS LICENSE ARE PERMITTED BETWEEN THE HOURS OF 9:00 A.M.-8:00 P.M.
2. FAILURE TO ABIDE BY THE LAUREL CITY CODE MAY RESULT IN SUSPENSION OR DENIAL OF THIS LICENSE.
3. VENDING RESTRICTIONS: NO VENDOR IS PERMITTED ON ANY PUBLIC SPACE OR CITY PARK OR WITHIN 25 FEET OF ANY PUBLIC RIGHT-OF-WAY, STREET, INTERSECTION OR PEDESTRIAN CROSSWALK; WITHIN 25 FEET OF ANY LOADING ZONE OR BUS STOP; IN ANY AREA WITHIN 100 FEET OF A BUILDING ENTRANCE OR EXIT, OR 250 FEET OF A HOTEL OR MOTEL BUILDING ENTRANCE OR EXIT; WITHIN 50 FEET OF DISPLAY WINDOWS OF A FIXED BUSINESS LOCATION; IN ANY AREA WITHIN 1,000 FEET OF A HOSPITAL, COLLEGE, UNIVERSITY, ELEMENTARY SCHOOL, MIDDLE SCHOOL OR HIGH SCHOOL, STATE OR FEDERAL BUILDING; WITHIN 25 FEET OF ANY FIRE HYDRANT OR FIRE ESCAPE; OR WITHIN 25 FEET OF ANY PARKING SPACE OR ACCESS RAMP DESIGNATED FOR PERSONS WITH DISABILITIES.
4. LICENSEE IS REQUIRED TO NOTIFY THIS DEPARTMENT WITHIN 15 DAYS OF LICENSE/LICENSEE CHANGES TO INCLUDE NAME, ADDRESS, TELEPHONE NUMBER, ETC.
5. PRINCE GEORGE'S COUNTY AND MARYLAND STATE HEALTH DEPARTMENT APPROVAL IS REQUIRED.

<i>APPROVED By the Office of the Fire Marshal and Permit Services:</i>	<i>Date:</i>
<i>APPROVED by the Director of Budget and Personnel Services:</i>	<i>Date:</i>

OFFICE USE ONLY: LICENSE NO.: _____
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