



Mobile Vendor License Application

CITY OF WASHINGTON, ILLINOIS

(Right-of-Way or Public Property)

Fully completed applications must be received by the City of Washington no less than **48 business hours** prior to the start of the event. Applications can be delivered or mailed to Washington City Hall at 301 Walnut Street, Washington, IL 61571 or emailed to vbrod@ci.washington.il.us.

NAME OF APPLICANT: _____

NAME OF BUSINESS: _____

PHONE: _____ EMAIL: _____

PERMANENT BUSINESS ADDRESS: _____

IS THIS PART OF A SPECIAL EVENT? YES NO IF YES, EVENT NAME: _____

TYPE OF VENDING TO BE CONDUCTED: FOOD AND/OR BEVERAGE RETAIL GOODS

INTENDING TO DO BUSINESS DATE(S): _____

INTENDING TO DO BUSINESS TIME(S): _____

INTENDING TO DO BUSINESS LOCATION: _____

IF THE LOCATION OF YOUR MOBILE SERVICE WILL DIRECTLY IMPACT PARKING IN FRONT OF A BUSINESS PLEASE PROVIDE

THE BUSINESS NAME: _____ (See back for details)

SIGNATURE OF IMPACTED BUSINESS(ES) OWNER/MANAGER: _____

Permission needed prior to submitting application.

The following items must be received along with the completed application at least 48 hours before the event:

- Completed and signed application to expire December 31st of the application year
- \$25 Permit Fee (payments may be made in person, by mail or via phone)
- Marked map showing placement of vehicle on right-of-way or public property (may use map on back for parking on the square)
- Current Retail Food Service Permit from Tazewell County Health Department
- Business Certificate of Registration (IL Department of Revenue)
- Current insurance policy (Commercial General Liability & Automobile Liability) See attached for limits

By signing below, I understand:

- I am responsible for obtaining my permit from City Hall prior to the set-up of my intended event.
- I will display the issued permit in a location visible to event officials and customers.
- This permit will expire on December 31st and it is my responsibility to renew my application each year.
- This permit covers only the events listed on the permit. Additional events require a new/updated application.
- I may be asked to leave an event should I fail to comply with this application process, City Code or State Statute.
- I am required to collect the local sales tax of 9% which I will then allocate to the City per IL Department of Revenue.
- The City of Washington maintains the right to deny/revoke permits based on the failure to meet the above items.

SIGNATURE OF APPLICANT _____

DATE _____

FOR OFFICE USE ONLY

\$25.00 annual permit fee paid: yes n/a All attachments submitted: yes

Reviewed by chief of police/deputy chief of police: yes n/a date _____

Signature of City Clerk or P&D Director _____ date _____

Continued on back

INSURANCE LIMITS

Commercial General Liability coverage:

- (1) Each occurrence - \$1,000,000
- (2) Damage to rented premises - \$100,000
- (3) Medical Expenses (any one person) - \$5,000
- (4) Personal & Advertising injury - \$1,000,000
- (5) General Aggregate - \$1,000,000
- (6) Products – Comp-Op Aggregate - \$1,000,000

Must state the following within:

The City of Washington as an Additional Insured on the Commercial General Liability, Auto Liability, and Excess Liability when required by written contract or agreement regarding activities by or on behalf of the Named Insured. This insurance is primary insurance and any other insurance maintained by the Additional Insured shall be excess only and non-contributing with this insurance. A waiver of subrogation applies to the Commercial Liability, Auto Liability, Excess Liability and Workers' Compensation/Employers Liability in favor of the Additional Insured. A copy of the thirty (30) days notification of cancellation endorsement needs to be included with the Certificate of Insurance naming the City of Washington.

Automobile Liability coverage:

- (1) Combined Single Limit (each accident) - \$1,000,000



IMPACTED BUSINESS(ES)

(Refer to the map above for location of your mobile unit and mark the corresponding impacted business(es) to the right. Please obtain permission prior to submitting application.)

- | | |
|--|---|
| <input type="checkbox"/> 1. Brunks | <input type="checkbox"/> 10. WRC |
| <input type="checkbox"/> 2. Step Back in Time | <input type="checkbox"/> 11. Tangled Roots |
| <input type="checkbox"/> 3. Define the Home | <input type="checkbox"/> 12. Blooming Daisies |
| <input type="checkbox"/> 4. Foster’s Jewelry | <input type="checkbox"/> 13. Ipava State Bank |
| <input type="checkbox"/> 5. Faire Coffee & Country Insurance | <input type="checkbox"/> 14. Timbuk Tech |
| <input type="checkbox"/> 6. Lucky Charlie | <input type="checkbox"/> 15. Cloud 9 |
| <input type="checkbox"/> 7. Homespun | <input type="checkbox"/> 16. Bent Penny |
| <input type="checkbox"/> 8. Sentimental Journey | <input type="checkbox"/> 17. Martin Financial |
| <input type="checkbox"/> 9. WRC | <input type="checkbox"/> 18. Parish’s Pub |