



TEMPORARY USE BUSINESS LICENSE APPLICATION for a
MOBILE FOOD VENDOR
(For Mobile Food Vehicle/Trailer)

Community & Economic Development Dept. • 437 N Wasatch Dr. • Layton, UT 84041
Phone: (801) 336-3788 • Fax: (801) 336-3789 • Email: businesslicensing@laytoncity.org

LICENSE #:

BUSINESS INFORMATION

Business Type (check one): Mobile Food Vendor - \$120.00 Mobile Food Event - \$85.00 (for participation at Food Courts only)

APPLICATION DATE: _____ **DESIRED OPENING DATE:** _____

BUSINESS NAME: _____

BUSINESS "DBA" NAME: (if applicable) _____

OWNER INFO: Name: _____ Driver License #/State: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Email Address: _____
Primary Phone #: _____ Alternate Phone #: _____

MAILING INFO: Address: _____ Suite/ Apt/Space #: _____
(if different) City: _____ State: _____ Zip: _____

EMERGENCY INFO: Contact Person Name: _____ Title: _____
Contact Phone #: _____ Alternate Phone #: _____

DESCRIPTION OF BUSINESS:

Describe Business Operations/Activities (be specific): _____

Describe Vendor Truck/Trailer(s) (be specific): _____

DETAILS OF THE BUSINESS:

1. Have you registered your business name with the State of Utah? Yes No State Registration #: _____
NOTE: Business name MUST be registered with the State of Utah prior to submitting application. Apply at osbr.utah.gov.
2. List your State Sales Tax #: _____
NOTE: Retail sale of food requires a sales tax number. Layton City must be identified as an outlet. Contact the Utah State Tax Commission at tax.utah.gov to obtain a sales tax number or add Layton City as an outlet to an existing sales tax number.
3. Do you have employees? Yes No If YES, list Federal Employer ID #: _____

BUSINESS LOCATIONS:

Please list the addresses of ALL locations within Layton City at which you will be operating.
Note: Locations must be within approved zoning districts.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

INFORMATION TO BE SUBMITTED WITH APPLICATION:

- Site Plan *for each business location:*
 - a) Address;
 - b) North Arrow;
 - c) Parking lot layout;
 - d) Adjacent Streets;
 - e) Location of adjacent building(s)
 - f) Specific location and dimensions of the mobile food vendor;
 - g) Any applicable school, park or restaurant buffers;
- Commercial Property Permission Form *for each business location;*
- Davis County Health Department Permit;
- BCI Name Check or Layton City Police Department Right of Access form no more than 180 days old.
A background check is required for any and all operators of the mobile food business.

COMPLIANCE STATEMENTS

Please read and check each Compliance Statement. *By checking the boxes below, you agree to comply with the following provisions:*

MOBILE FOOD VENDORS:

- Shall be permitted to operate in all B-RP, C-H, CP-1, CP-2, CP-3, M-1, M-2, MU and MU-TOD zoning districts;
- Shall not operate within a two hundred foot (200') radius of any restaurant, park or school unless prior written permission from the property owner or authorized agent is provided;
- A "Commercial Property Permission Form" providing the vendor permission to locate on commercial property is required for each location. This permission form must be signed by the property owner or authorized agent;
- Vendors shall conduct business only at the locations approved with this application. All additional locations must be reviewed and approved by the Planning Division prior to operation;
- No vendor or associated signage shall be located in clear view areas;
- All signage must be permanently attached to the mobile food vendor, except for one menu sign that shall not exceed three feet (3') by four feet (4') and shall be placed on a hard surface no more than ten feet (10') from the food vendor;
- Mobile food vehicles and trailers shall be maintained in a neat and professional manner;
- Vendors shall only operate when parked on a hard surface;
- The operator shall provide trash containers which shall be removed from the site when the vendor vacates the site;
- The use shall not cause noise, light or glare which adversely impacts surrounding uses. Flashing, bright, blinking or traveling lights shall NOT be permitted;
- The use shall not be placed so as to disrupt the vehicle and pedestrian traffic flow into or out of a site;
- Vendors shall not operate as a drive-through;
- Permitted hours of operation are between 7:00 a.m. – 10:00 p.m. and shall not extend for more than twelve (12) hours within a twenty-four (24) hour period at any one location;
- Each vendor shall comply with State, County, and City retail sales tax regulations;
- A copy of an approved business license and Commercial Property Permission Form shall be kept in the business at all times;
- An annual inspection conducted by the Fire Department is required for every mobile food vehicle or mobile food trailer intended to operate within the City.

APPLICANT'S AGREEMENT

I am aware that this application does not authorize me to conduct business until approved by the Layton City Community and Economic Development Director and a license has been issued. Once issued, no business license shall be transferred from one person to another, nor from one location to another.

I, the undersigned, an authorized agent or representative, do hereby agree to conduct said business strictly in accordance with all Layton City codes governing such business, and swear under penalty of law that the information contained herein is true and correct to the best of my knowledge. I understand that to falsify any information on this application is grounds for denial and/or revocation of this license and other penalties as provided by law.

If you are signing this application electronically, you agree that your electronic signature is the legal equivalent of your manual signature. You also agree that no certification or any verification is necessary to validate your e-signature.

SIGNATURE: _____ TITLE: _____ DATE: _____

OFFICE USE ONLY

Revised 02/24/16

Planning Division: ___ Approved ___ Denied _____ Date
Licensing Officer : ___ Approved ___ Denied _____ Date
Zoning District(s): _____
Comments: _____

Receipt #: _____ License # _____
Received By: _____ Date: _____
Amount: _____ 2% Fee: _____
Type of Payment: Cash Check # _____ Credit Card
 Phone Online Mail In Person
Notifications: Fire PD