KIOSK, PUSHCARTS AND PORTABLE VENDORS APPLICATION FOR LICENSE INDIVIDUAL

- 1. A signed, notarized agreement between the owner of the pushcart and the owner and the lessee, if any, of the parcel at which the pushcart, kiosk is to be located, permitting the pushcart to be operated upon the parcel. This agreement must be in effect for the duration of the license period.
- 2. A statement as to the types of foodstuff to be sold from the pushcart.
- 3. Evidence of liability insurance in the form of a Certificate of Insurance issued by an insurance company licensed to do business in the State of Illinois. The Certificate shall insure the applicant and the owner and lessee, if any, of the parcel at a minimum amount of \$300,000.00 Single Limit Coverage.

The insurance coverage shall be kept current at all times during the license year. Upon request by the Village Clerk or Zoning Administrator, a licensee shall provide evidence of coverage at time other than the initial application and renewal of license.

- 4. A valid permit from the Madison County Health Department or Statement from them that all health requirements have been met.
- 5. A copy of the State of Illinois Retailer's Occupation Tax Certificate.
- 6. A plan, diagram, and description of the pushcart, kiosk detailing at a minimum, the size, dimensions, total square footage, parking, construction, method of food preparation, and manner of disposing of trash and other waste material originating at or from the Pushcart/Kiosk. Evidence of potable water system, if applicable.
- 7. A letter of approval for the plan and diagram of the pushcart and its surrounding parking showing the entrance's exit's and parking from the Village Director of Public Works.
- 8. A colored photograph, not less than three (3) inches by (3) inches in size, of the Pushcart/Kiosk.
- 9. A statement showing the storage arrangements of the Pushcart/Kiosk during the off season, and a point of contact.
- 10. Any signage for the Pushcart/Kiosk operation must be applied for separately under the village signage ordinance with the appropriate fees and requirements.
- 11. Proof of a 911 address assigned by the Godfrey Fire Chief.
- 12. Proof of registration with the Illinois Secretary of State as either a corporation/limited partnership OR registration with the Clerk of Madison County as a sole proprietorship under business under the assumed name act.

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Type of License: Annual	License Number Issued	d:
Fee: \$100.00 (annually upon a	pplication)	
Payment of the fee shall be ma MONEY ORDER at the time of paid pursuant to Godfrey Villa	the application. There	shall be no refund for any fee
When a license is applied for the a maximum of 7 contiguous maximum of 7 contiguous maximum of 8 conti	onths within the 12 mosion. License period beg	onth license period that they gins on the first day of the first
NAME:	Phone No	
ADDRESS:		
Date of Birth:	Social Sec. No	o
AUTHORIZED AGENT/MANAG	SER/OPERATOR	
NAME:	Phone No	
ADDRESS:		
Date of Birth:	Social Sec. No	
NAME OF BUSINESS:	NESS: Phone No	
LOCATION:		
PARCEL ID:		
CIRCLE A MAXIMUM OF 7 CO	NTIGUOUS MONTHS	YOU ARE APPLYING FOR:
JAN FEB MAR API	R MAY JUN JUL AUG S	SEP OCT NOV DEC
PROPOSED HOURS OF OPERA	ATION	
Mon Tues	Wed	Thurs
Fri Sat	Sun	

KIOSK APPLICATION FORM

The undersigned applicant or authorized agent of the applicant if applicant is other than an individual verifies, under oath, that he or she has read the above and foregoing application and that same is true and correct.

Dated:	
	Applicant or Agent or Representative Of Applicant
Subscribed and sworn on before me,, 20	a Notary Public, this day of
	Notary Public