



Mobile Food Vending Permit

Form MV-B Base Application for Operator

Planning and Community Development Department & Police Department

OWNER INFORMATION

1. Owner Name on Permit: _____
2. Make/Model of Vehicle: _____
 - ☐ Truck requiring Class C license
 - ☐ Truck requiring special license
 - ☐ Other

OPERATOR INFORMATION

3. Operator Name: _____
4. Address: _____
5. City, State, Zip: _____
6. Phone Number(s): _____
7. Date of Birth (MM/DD/YYYY): _____
8. **Follow up after form is submitted:** You will be issued a Live Scan Form from your owner for you as an operator. You will need to get the Live Scan and provide a receipt of the live scan to the Santa Cruz Police Department. If you do not submit proof of Live Scan, your owner's application will not be processed.

SIGNATURES UNDER PENALTY OF PERJURY

By signing below, I certify that (initial all that apply):

- _____ During the last seven years, I have not been convicted of any felony or any crime involving driving under the influence of alcohol or other controlled substance; any crime involving the sale, use of, or transportation of narcotics; any crime involving reckless driving; any suspension of driver's license; a criminal assault; any crime involving theft or embezzlement; or any child annoyance or sex-related crime. I understand that and submit to a background investigation conducted by the police department.
- _____ I understand that Mobile Vending permits are for food vending only. Vending of goods, wares, or merchandise is prohibited.
- _____ If granted a mobile food vending permit, I agree to abide by all the conditions of approval issued with my permit, the terms of Santa Cruz Municipal Code Chapter 5.22, all other applicable laws, and all amendments to the conditions of approval, the Santa Cruz Municipal Code, and applicable laws. If I violated any of the above, I understand that my permit may be revoked.

Name Print: _____

Signature: _____

Date: _____ Permit Number: _____