



City Clerk's Office
MOBILE SALES UNIT LICENSE
 Application

THIS APPLICATION SHALL NOT BE CONSIDERED COMPLETE UNTIL STAFF HAS RECEIVED ALL REQUIRED INFORMATION.

Applicant:		File #:
Date complete application received:		Date license issued or denied:
Applicant ✓	APPLICATION REQUIREMENTS:	Staff ✓
	Completed Mobile Sales Unit License Application	
	Color copy of valid driver's license or government issued identification card	
	1 — 2"x 2" Color photographs of applicant	
	Proof of general liability insurance policy <ul style="list-style-type: none"> • Names City of Meridian as <u>additional insured</u> • \$500,000.00 per person bodily injury • \$500,000.00 per occurrence bodily injury • \$100,000.00 per occurrence property damage 	
	Proof of Motor Vehicle Insurance	
	Proof of Central District Health approval/permit (if applicable)	
	Application fee - \$73.25 (Includes \$33.25 fingerprinting and \$40.00 licensing)	
	Fingerprints taken by Idaho State Police: <ul style="list-style-type: none"> • City Clerk staff will provide applicant with Privacy Statement and fingerprint card to take to ISP upon completion of above requirements. • ISP will charge an additional/separate fee of \$10.00 	
STAFF USE ONLY:		
	Meridian Police Department approval/background check	
	Meridian Attorney's Office approval	
	Meridian Parks Department approval (if applicable)	



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APPLICANT INFORMATION

Applicant Name: _____ Phone: _____

Applicant Address: _____

Driver's License number: _____ State: _____

Employer: _____ Phone: _____

Employer E-mail Address: _____

Employer Mailing Address: _____

Employer Physical Address: _____

Tax Identification Number: _____

Agent for service of process in Idaho (*person responsible for receiving legal documentation on behalf of Applicant*): _____

List all infraction, misdemeanor or felony arrests/charges and dispositions (conviction, acquittal, or dismissal), including any probation violations and/or bail forfeitures: _____

DESCRIPTION OF OPERATIONS

Mobile Sales Unit will operate and/or travel within a park: Yes No

Dates, hours, and locations of operation: _____

Goods and services to be sold, traded, given away, offered, displayed, and/or delivered: _____

Form(s) of conveyance or transport to be used in operation, traveling, and/or sales: _____

Complete for any and all motor vehicles (attach additional pages if necessary):

License plate state and number	Make	Model	Color