



City of Phoenix
City Clerk Department
License Services Section

STAFF USE ONLY

Business License Number:

- Mobile Vendor (0974)
 Mobile Food Vendor (0975)

NSD TRACKING NUMBER:

MOBILE VENDOR / MOBILE FOOD VENDOR LICENSE APPLICATION

1. Name of Mobile Vending Operation:		7. Business Type (check one): <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Other (specify) _____		8. Today's Date: / /	
2. Location of Mobile Vending Operation: _____ <i>Street Address</i> _____ <i>City, State, Zip</i> _____ <i>Business Phone, if any</i>		If the business is a corporation, partnership, or LLC, applicant information must be provided for all shareholders, partners or members.		9. Privilege Tax License Number:	
3. Who owns the mobile vending operation? (if a corporation, partnership or LLC, list company name):				10. Business will sell: <input type="checkbox"/> Food <input type="checkbox"/> Non-Food Items	
4. Previous Business Name, Location, or Owner:		11. Briefly describe the items to be sold:			
5. Will a motor vehicle be used in connection with the mobile vending operation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the following information: _____ <i>Vehicle Year, Make, Model, Color</i> _____ <i>License Plate Number/State</i> A copy of a current Arizona vehicle registration must be submitted with this application.		12. If food will be sold, do you have a Maricopa County Mobile Food Vendor Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No A copy of a current Maricopa County Mobile Food Vendor Permit must be submitted with this application if food will be sold.			
6. Who is the owner of the site where the mobile vending operation is located? _____ <i>Name</i> _____ <i>Mailing Address</i> _____ <i>()</i> _____ <i>Telephone Number</i> A copy of a deed, current lease or notarized permission form must be submitted with this application showing how long the business has been at the location.		13. Who is the manager of the business? _____ <i>Name</i> _____ <i>Residence Address</i> _____ <i>()</i> _____ <i>Telephone Number</i> _____ <i>Driver's License Number/State</i>			
		14. Who is the designated agent for the business? (This person will receive notices from the City.) _____ <i>Name</i> _____ <i>Residence Address</i> _____ <i>()</i> _____ <i>Telephone Number</i> _____ <i>Driver's License Number/State</i>			

<p>15. Have you prepared a site plan (diagram) showing compliance of your business with the Zoning Ordinance and the distance requirements set forth in the Mobile Vending Ordinance?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If you need help preparing the site plan, please call Neighborhood Preservation at 602-262-7844.</i></p>	<p>16. Will the mobile vending unit require a water or power hook-up at the site?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes, the property owner must get a permit and inspection approval from Development Services Department and have a copy of that approval in the mobile vending unit BEFORE operating.</i></p>
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Applicant Information: (for corporation, partnership or LLC, attach additional sheets as needed)

<p>17. Full Name:</p>	<p>21. Other names used in past 5 years (including maiden name):</p>			
<p>18. Current Residence Address:</p>	<p>22. Other addresses in past 3 years (include dates):</p>			
<p>19. Mailing Address for City Notices (if different):</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">23. Place of Birth:</td> <td style="width:50%;">24. Date of Birth:</td> </tr> </table>	23. Place of Birth:	24. Date of Birth:	
23. Place of Birth:	24. Date of Birth:			
<p>20. Home Telephone Number: (include area code)</p>	<p>25. Message number: (include area code)</p>			
<p>26. Driver's License Number/State:</p>	<p>27. Height:</p>	<p>28. Weight:</p>	<p>29. Hair Color:</p>	<p>30. Eye Color:</p>

31. ***Written proof of age must be submitted with this application. Acceptable proof includes picture driver's license or other current photo identification document issued by a governmental agency.***

Type of I.D.: _____ I.D. Number: _____ State: _____ Expires: _____

32. Have you ever had a mobile vendor license revoked or suspended?

Yes No If yes, when and where?

33. Please list all felony and misdemeanor convictions (excluding minor traffic offenses) in the past 5 years (If none, please write "NONE" and initial):

34. Please list all notices or citations you have received for violations of either the Zoning Ordinance or the Mobile Vending Ordinance in the past 5 years: (If none, please write "NONE" and initial.)

35. Applicant Signature: _____ Corporate Title (if applicable): _____ Date: _____

DO NOT WRITE BELOW THIS LINE -- FOR STAFF USE ONLY

Property Owner	Health Permit	Vehicle Reg.	Proof of Age	Site Plan	Fingerprint	Cashier	Staff Initials
<input type="checkbox"/> Lease <input type="checkbox"/> Perm.	<input type="checkbox"/> Exp: _____	<input type="checkbox"/> Exp: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><input type="checkbox"/> Approved <input type="checkbox"/> Disapproved</p> <p>_____</p> <p>License Services Supervisor</p> <p>_____/_____/_____</p> <p>Date</p>		<p>Departmental Recommendation: <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved</p> <p>NSD: _____ / / _____</p> <p>Police: _____ / / _____</p>					

Mobile Vendor License Application - Continued

Business Name _____ **License No.** _____

Additional Applicant Information (if more than one applicant):				
17. Full Name:		21. Other names used in past 5 years (including maiden name):		
18. Current Residence Address:		22. Other addresses in past 3 years (include dates):		
19. Mailing Address for City Notices (if different):		23. Place of Birth:		24. Date of Birth:
20. Home Telephone Number: (include area code)		25. Message number: (include area code)		
26. Driver's License Number and State:	27. Height:	28. Weight:	29. Hair Color:	30. Eye Color:
31. <i>Written proof of age must be submitted with this application. Acceptable proof includes picture driver's license or other current photo identification document issued by a governmental agency.</i> Type of I.D.: _____ I.D. Number: _____ State: _____ Expires: _____				
32. Have you ever had a mobile vendor license revoked or suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when and where?				
33. Please list all felony and misdemeanor convictions (excluding minor traffic offenses) in the past 5 years (If none, please write "NONE" and initial):				
34. Please list all notices or citations you have received for violations of either the Zoning Ordinance or the Mobile Vending Ordinance in the past 5 years: (If none, please write "NONE" and initial.)				
35. Applicant Signature:		Corporate Title (if applicable):		Date:

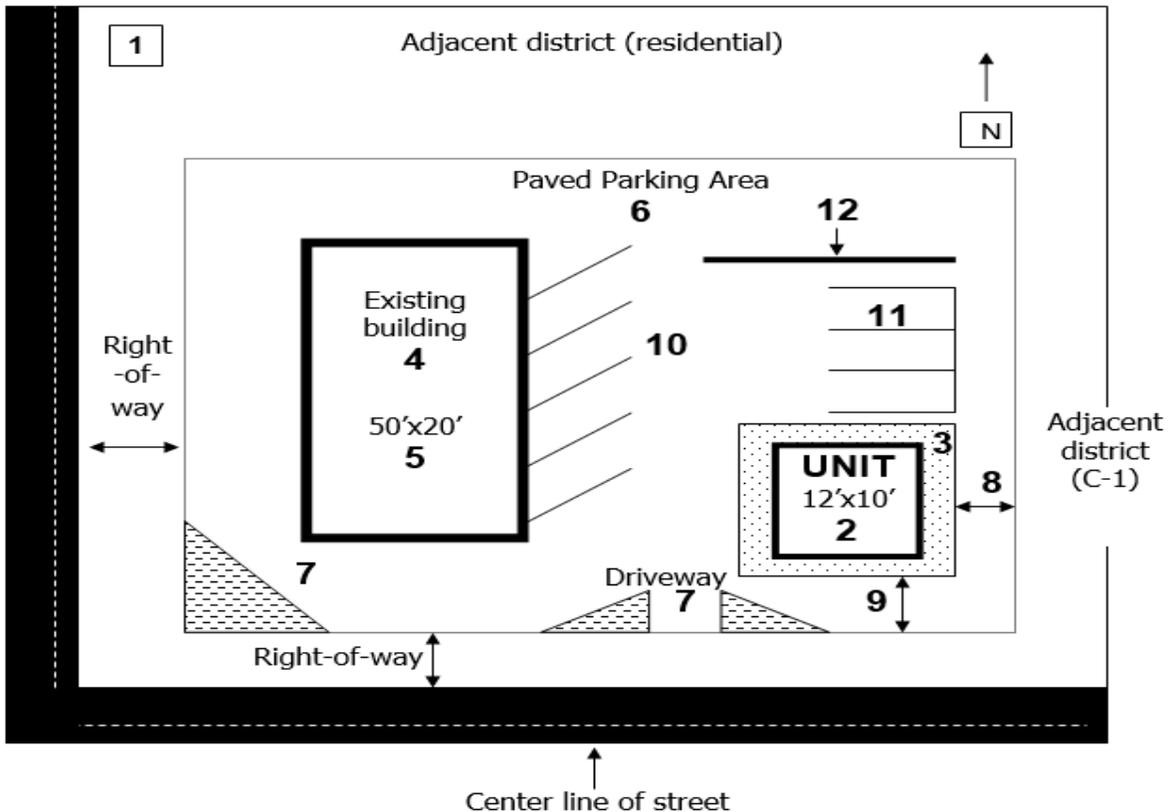
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Proof of Age	Fingerprint	Staff Initials	Police Department Recommendation: <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved _____ / ____ / ____
<input type="checkbox"/>	<input type="checkbox"/>		

Mobile Vending Plot Plan Requirements

Please include the layout of lot and all of the following items on your plot plan:

1. Provide address, layout of lot with street or Right-of-way location and North direction arrow.
2. Provide Size and location of mobile vending unit.
3. Permanently marked areas surrounding the unit for 10 feet on all sides.
4. Location of existing building on lot (if any).
5. Building size, if known.
6. Dustproofed parking and maneuvering area.
7. Visibility triangle at driveway and on any corner lot.
8. Provide distance from the vending unit to side property lines. Include zoning district for adjacent properties if residential, C-1, or C-2 zones.
9. Provide distance of vending unit to the right-of-way (street or sidewalk). Minimum 15'.
10. Identify parking spaces required for existing use or business on the site. This must meet the minimum requirements determined by the City of Phoenix Zoning Ordinance.
11. Identify the three required parking spaces for mobile vendor use. **These spaces are in addition to all other required parking spaces for any existing uses.** If the spaces are not on the same site, they must meet requirements of Zoning Ordinance Section 702 and the applicant must submit an additional plot plan for the parking location.
12. Required screening for parking adjacent to a residential zone.



NOTE: This plot plan is not subject to formal Development Services Department review. It does not require an engineer stamp of approval and the review of the plan will not cost anything. Your diagram must look like your site.

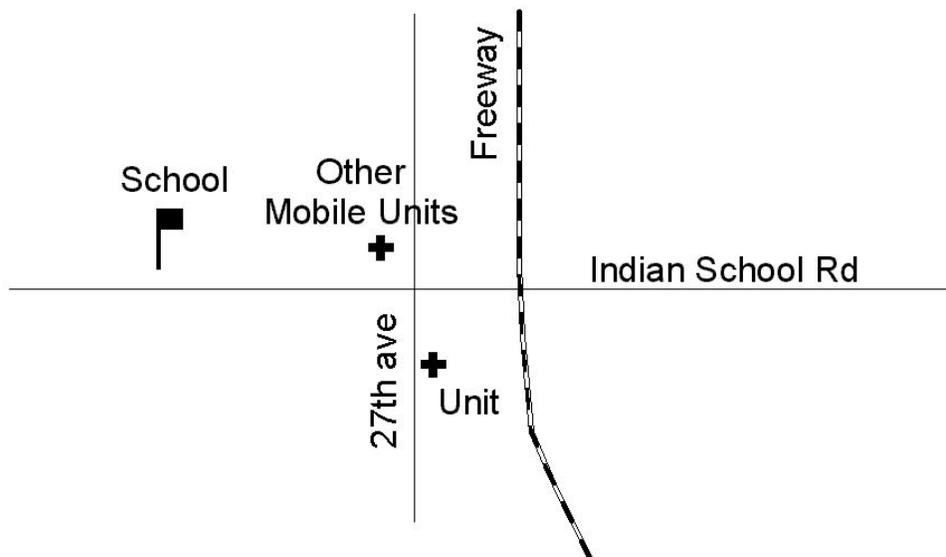
Mobile Vending Plot Plan Requirements

Mobile Vending Site Locator

Please include all listed items on your site plan:

- Other mobile vending units within one quarter-mile (1,320 feet)
- Schools within 300 feet, lot line to lot line
- Freeway intersections within 100 feet
- Residential property within 150 feet of mobile vending unit perimeter
- Required parking spaces not at the location of the mobile vending unit, if any

Example Mobile Vending Site Locator



ZONING CHECK FORM FOR REGULATED BUSINESS LICENSE APPLICATIONS

The purpose of this form is to identify any *obvious* location deficiencies in relation to a Regulated Business License application before the license application is submitted to License Services. Deficiencies such as: Activity is not allowed in the zoning district, or activity is only allowed if a Use Permit is obtained, or activity is only allowed with restrictions, etc...

APPLICANT:

- Complete questions 1-5 on this form and submit the completed form to the Planning and Development Department (PDD) for review and comments at: 200 W. Washington St., 2nd Fl.
- Once this form has been reviewed by PDD, take the form to License Services to discuss PDD's comments.

1) What type of license will you be applying for? _____

2) What is the business address (location where the license will be used)?

Must match the business address listed on the application submitted to License Services.

3) Describe **all** proposed business activities at the business address including products to be bought, sold, traded, or exchanged, and all services to be provided:

4) Will you have any type of outdoor display(s) at the business address location? Yes No

5) Will you store any products outdoors at the business address location? Yes No

This form does not constitute PDDs approval or final recommendation related to a Regulated Business License application and is subject to change once the license application is submitted to License Services and reviewed in its entirety.

APPLICANT'S ACKNOWLEDGEMENT INITIALS: _____

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6) Zoning District: _____

7) Is this location zoned properly for the proposed uses?
 Yes Yes, with a Use Permit Yes, as Accessory Use No

Comments: _____
(PDD REVIEWER: PLEASE ADD COMMENTS AS NEEDED & PROVIDE CUSTOMER WITH A COPY OF ANY PERTINENT/LISTED ZONING ORDINANCE SECTIONS)

8) Is outdoor display or storage of merchandise allowed? Yes No
Comments: _____

(PDD REVIEWER: PLEASE ADD COMMENTS AS NEEDED & PROVIDE CUSTOMER WITH A COPY OF ANY PERTINENT/LISTED ZONING ORDINANCE SECTIONS)

9) Additional Zoning District Regulations: (i.e. Square Footage Requirements, Setbacks, etc.)

(PDD REVIEWER: PLEASE ADD COMMENTS AS NEEDED & PROVIDE CUSTOMER WITH A COPY OF ANY PERTINENT/LISTED ZONING ORDINANCE SECTIONS)

10) Additional Information: (Non-Conformities, etc...)

PDD Reviewer Name: _____

Date: _____



City of Phoenix
CITY CLERK DEPARTMENT
LICENSE SERVICES

ADDITIONAL APPLICATION INFORMATION

The following information is provided pursuant to Arizona Revised Statutes (A.R.S.) Section 9-834(H).

9-834. Prohibited acts by municipalities and employees; enforcement; notice

- A. A municipality shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, ordinance or code. A general grant of authority does not constitute a basis for imposing a licensing requirement or condition unless the authority specifically authorizes the requirement or condition.
- B. Unless specifically authorized, a municipality shall avoid duplication of other laws that do not enhance regulatory clarity and shall avoid dual permitting to the maximum extent practicable.
- C. This section does not prohibit municipal flexibility to issue licenses or adopt ordinances or codes.
- D. A municipality shall not request or initiate discussions with a person about waiving that person's rights.
- E. This section may be enforced in a private civil action and relief may be awarded against a municipality. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against a municipality for a violation of this section.
- F. A municipal employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the municipality's adopted personnel policy.
- G. This section does not abrogate the immunity provided by Section 12-820.01 or 12-820.02.

A full copy of the Arizona Revised Statutes may be found on-line at: www.azleg.gov.