

Name of Event

## CHICAGO DEPARTMENT OF Business Affairs and Consumer Protection SPECIAL EVENT PERMIT APPLICATION

## SPECIAL EVENT FOOD TRUCK SINGLE EVENT LICENSE APPLICATION

PLEASE TYPE OR PRINT CLEARLY. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

THIS FORM MUST BE SUBMITTED 20 CALENDAR DAYS PRIOR TO THE EVENT

## FEE: \$ 75.00 PER VENDOR. (Upon approval you will be sent a link to pay for the license online).

Please type or print clearly. Application will be returned if not completed in its entirety.

Address of Event (Range if possible)							
Date(s) of Event			Hours of Event				
Name of Sponsoring Event/Coordinator				Phone Number			
Legal Name of Mobile Food Vendor				Contact			
Department of Business Affairs & Consumer Protection Account Number			Phone Number				
If you do not have a Chicago Department of Business Affairs & Consumer Protect account or you do not know your account number, please phone (312) 74-GOBI2							
Address		City			Zip Code		
City of Chicago Mobile Food License #	City of Chicago Mobi	le Food Lice	ense Exp	piration Date	Food Truck Licer	se Plate Expiration Date	
I acknowledge that I am only preparing/dispensing for license requirements	bod directly from a City	v of Chicago □ YES	licensed	d Mobile Food vehicle	, (no outside booth,	/tent) in compliance with a	
I acknowledge that I am only selling items from our (	City of Chicago Departr	nent of Hea	lth pre-	approved menu?	□ NO	□ YES	
SIGNATURE (*Must be signed by an owner or officer)					_Date:		
Print Name:Tit							