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*Creativity Redefined!*

618-242-6815  
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**APPLICATION FOR MOBILE FOOD VENDOR LICENSE/ICE CREAM TRUCK**

Pursuant to Chapter 118  
CITY OF MT. VERNON, ILLINOIS

\$25.00 per day or \$200.00 per 30 days – FOOD VENDOR  
\$25.00 per day or \$300.00/year – ICE CREAM TRUCK

1. Owner of the Vehicle: \_\_\_\_\_  
\_\_\_\_\_
2. Owner's Street Address: \_\_\_\_\_  
\_\_\_\_\_
3. Owner's Telephone: \_\_\_\_\_
4. Owner's E-Mail: \_\_\_\_\_
5. Vehicle Operator (Person Selling): \_\_\_\_\_  
\_\_\_\_\_
6. Operator's Address: \_\_\_\_\_  
\_\_\_\_\_
7. Operator's Telephone: \_\_\_\_\_
8. Operator's Email: \_\_\_\_\_
9. Operator's Photo ID or Driver's License Number: \_\_\_\_\_  
(Attach Copy)
10. Vehicle License and Registration with VIN: \_\_\_\_\_  
(Attach Copy)
11. State or County Health Department License or Permit: \_\_\_\_\_  
(Attach Copy)
12. Illinois Dept of Revenue Certificate of Registration Number: \_\_\_\_\_  
(Attach copy of Certificate of Registration)
13. Certificates of Insurance (Itinerant Vendors): \_\_\_\_\_  
(Attach proof of Motor Vehicle and Liability Insurance)
14. The Location at Which the Applicant Intends to Do Business: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Each license issued herein shall state in prominent language the following:  
The holder of this License is not affiliated with nor endorsed by the City of Mt. Vernon, Illinois.

15. Dates of Sale: \_\_\_\_\_

16. The Applicant Shall Provide A Copy of a Written Lease or Other Written Evidence from the Owner of the Location Where the Applicant Proposes to Sell Indicating Permission of the Owner to Use the Location. \_\_\_\_\_

(Attach Written Permission or Lease from Property Owner)

17. Applicant Requests Copy of Chapter 118 of the City of Mt. Vernon Revised Code.  
Yes: \_\_\_\_\_ No: \_\_\_\_\_

***The person applying for this License swears that the contents are, to the best of their knowledge, true, that the Operator has read Chapter 118 of the City of Mt. Vernon Revised Code, and that the Operator will comply with all applicable requirements.***

Date \_\_\_\_\_ OWNER'S SIGNATURE \_\_\_\_\_

Date \_\_\_\_\_ OPERATOR'S SIGNATURE \_\_\_\_\_

Filed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

*City Clerk of Mount Vernon, Illinois*

**BY** \_\_\_\_\_

(SEAL)

**FOR OFFICE USE ONLY:**

**DATE OF ISSUE:** \_\_\_\_\_ **LICENSE #:** \_\_\_\_\_

**LICENSE FEE:** \_\_\_\_\_

**EFFECTIVE DATES FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_