

MOBILE FOOD VENDOR REQUIREMENTS

1. Zoning form (if located in Kansas City, KS)
2. Occupation Tax Application
3. Street/Sidewalk Vendor License Application
4. Health Inspection with the Kansas Dept. of Agriculture (785-564-6700)
5. Fire Inspection from a Heart of America fire inspector (913-573-5550)
6. Kansas State retail sales tax certificate from the Kansas Dept. of Revenue (785-296-3909 ask for Business Tax Dept)
7. Certificate of Insurance with “The Unified Government of Wyandotte County Kansas City, KS is listed as additional insured. Must provide 10 day prior notice to licensed administrator” in the description of operations and certificate holder should read...
Unified Government of Wyandotte County
Kansas City, KS
4953 State Ave.
Kansas City, KS 66102
8. Photos of the truck/trailer/cart (1 interior and 1 of each exterior side.)
9. If LLC/Corporation, then articles of incorporation/organization are needed.
10. Can be paid with cash or check.



BUSINESS LICENSE DIVISION

Neighborhood Resource Center

Unified Government of Wyandotte County/ Kansas City, Kansas

4953 State Avenue, Kansas City, Kansas 66101

p. (913) 573-8780 | f. (913) 573-8622 | www.wycokck.org/businesslicense

Office Use 1-20

Parent Record # _____

STREET/SIDEWALK VENDOR LICENSE APPLICATION

Annual Fee \$100.00 Jan. 1-Dec. 31

Special Event (\$20.00 2days, \$30.00 3-10 days)

Occupation Tax \$ _____

Sale Dates: _____

Application Date: _____

Owners Name: _____

Owners Address: _____

Mailing Address: _____

Telephone Number: _____

Ownership Type Individual Partnership Corporation LLC

(If Corporation or LLC is selected include Articles of Incorporation or Organization, if Partnership is selected provide complete list of all partners, including phone and address.)

Sales will be conducted from Vehicle Cart Tent

Vending of prepared and packaged ice cream, ice cream product, frozen dessert items, and other similar food items **is prohibited from pushcarts.**

Proposed location of vehicle, cart or tent (provide address, detailed description, and map showing specific location). _____

Proposed hours of operation: _____

Provide photograph of vehicle or cart, and describe the nature, size, and manner of construction.

Provide a complete list and description of all food items to be sold (attach separate sheet if necessary). Non-food items, or food items not stated here, cannot be sold.

Provide a complete list of all persons that will handle or sell goods from licensed vehicle, or cart, to include name, address, and telephone number (attach separate sheet if necessary). No other person is allowed to handle or sell goods.

Will liquid petroleum or propane gas be used on or near the vehicle or cart?
 Yes No If yes, attach proof of Fire Department inspection and approval.

Kansas State Sales Tax Identification Number _____

Proof of inspection and approval by the Kansas Department of Health and Environment (prepared foods), or Wyandotte County Health Department (prepackaged foods) must accompany this application.

A certificate of comprehensive general liability insurance with limits of not less than \$100,000.00 for death of or injury to one person, \$300,000.00 for death of or injury to more than one person, and \$25,000.00 for property damage, per occurrence, shall accompany this application, and must provide that 10 days prior notice be given to the License Administrator in the event of cancellation.

Applicant agrees the city shall be an additional named insured on the aforementioned insurance policy, as required by ordinance for the completion of this license and has provided a certificate of insurance indicating such coverage.

Each unit must clearly display the license, all permits, the name and telephone number of the licensee, and the telephone number of the License Administrator.

By my signature I certify that I have received, read, and understand the contents of the Streets and Sidewalks Ordinance relating to vending, and agree to abide by the contents thereof:

Signature Date

Subscribed and sworn by me this _____ day of _____ 20____

Notary Public _____

Important Contacts:
Department Name

Phone Number

Web Address

Business License	(913)573-8780 (call to check on zoning status after 3 days)	www.wycokck.org
Planning & Zoning	(913)573-5750 (if special use permit required)	www.wycokck.org
Building Inspection	(913)573-8620 (after zoning approved & utilities on call setup appt)	www.wycokck.org
County Appraisers Office	(913)573-8400 (option #2)	www.wycokck.org
Kansas Department of Revenue ③ retail sales tax	(785)296-3909 (ask receptionist for Business Tax Dept) LOCAL OFFICE: 7600 W 119 th St Ste A Overland Park KS 66213 (785-213-4795)	www.ksrevenue.org
Kansas Alcohol Beverage Control	(785)296-7015	www.ksrevenue.org/abc.htm
Kansas Auto Dealer Licensing Bureau	(785)296-3626	www.ksrevenue.org/vehicle.htm
① health inspection Kansas Dept. of Agricultural (Food Safety) (Any foods, pop, food production, cooking from home, store foods prior to distribution)	(785)564-6700	http://agriculture.ks.gov/divisions-programs/food-safety-lodging
WYCO Environmental Health Services (HEALTH DEPT) ***Retail Food (preparing foods, soda, candy, etc) ② fire inspection WYCO Fire Marshal (Autobody shops w/paint booth or welding, frying)	(913)573-6705	www.wycokck.org
Kansas Secretary of State	(785)296-4564 (do search corporation fill out/pay for)	www.kssos.org
Internal Revenue Service	1-800-829-4933	www.irs.gov
Kansas Attorney General	(785)296-3751	http://ag.ks.gov/in-your-corner-kansas/resources/roofing-registration
CHILD CARE- WYCO Health Dept	(913)573-6702	
LAND BANK	(913)573-8977 (vacant lot, etc. & want to see if available for sale)	

