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.

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ent Record	#



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

STREET/SIDEWALK VENDOR LICENSE APPLICATION

DIRECTIONE WITH VENDORE	TODI IDE IN I DICITION
[] 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 (If Corporation or LLC is selected include Articles of Incorpor provide complete list of all partners, including phone and address.	ration or Organization, if Partnership is selected
Sales will be conducted from [] Vehicle [] Cart [] Tent Vending of prepared and packaged ice cream, ice cream produitems is prohibited from pushcarts.	ct, frozen dessert items, and other similar food
Proposed location of vehicle, cart or tent (provide address, detallocation).	
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 items, or food items not stated here, cannot be sold.	

Provide a complete list of all persons that name, address, and telephone number (at or sell goods.	t will handle or so tach separate she	ell goods from lice et if necessary). N	ensed vehicle, o o other person	or cart, to include is allowed to handle
Will liquid petroleum or propane gas be [] Yes [] No If yes, attach proof of Fire	used on or near the Department ins	he vehicle or cart? pection and approv	val.	
Kansas State Sales Tax Identification Nu	ımber			
Proof of inspection and approval by the l Wyandotte County Health Department (p				
A certificate of comprehensive general li- or injury to one person, \$300,000.00 for damage, per occurrence, shall accompan- to the License Administrator in the even	death of or injury this application	y to more than one a, and must provide	person, and \$2	5,000.00 for property
Applicant agrees the city shall be an add required by ordinance for the completion such coverage.				
Each unit must clearly display the licens telephone number of the License Admin		e name and telepho	one number of t	he licensee, and the
By my signature I certify that I have reco			tents of the Stre	eets and Sidewalks
Signature		Date		
Subscribed and sworn by me this	day of		20	
Notary Public				

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-	Section 2

Business License

Planning & Zoning

Building Inspection

County Appraisers Office

Kansas Department of Revenue 3) refaul saler tax Kansas Alcohol Beverage Control

(785)296-7015

(785)296-3626

Kansas Auto Dealer Licensing Bureau

(Any foods, pop, food production, cooking from home, store foods prior to distribution) (U) health inspection (Food Safety) (785)564-6700

WYCO Environmental Health Services (HEALTH DEPT) *** Retail Food

(913)573-6705

prepkg foods, soda, candy, ctc) The use then

(913)573-5550 (Autobody shops w/paint booth or welding, frying)

Kansas Secretary of State

Kansas Attorney General

Internal Revenue Service

1-800-829-4933

(785)296-3751

(913)573-6702

CHILD CARE. WYCO Health Dept

LAND BANK

Phone Number

(913)573-8780 (call to check on zoning status after 3 days)

www.wycokck.org

Web Address

www.wycokck.org

www.wycokck.org

www.wycokck.org

(913)573-5750 (if special use permit required)

(913)573-8620 (after zoning approved & utilities on call setup appt)

(913)573-8400 (option #2)

LOCAL OFFICE: 7600 W 119th St Ste A Overland Park KS 66213 (785-213-4795) (785)296-3909 (ask receptionist for Business Tax Dept)

www.ksrevenue.org/abc.htm

www.ksrevenue.org

www.ksrevenue.org/vehicle.htm

http://agriculture.ks.gov/divisions-programs/food-safety-lodging

www.wycokck.org

(785)296-4564 (do search corporation fill out/pay for)

www.kssos.org

WWW.IFS.20V

http://ag.ks.gov/in-vour-corner-kansas/resources/roofing-registration

(913)573-8977 (vacant lot, etc. & want to see if available for sale)

ACORI

CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY) 6/15/2023 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: PRODUCER ADDRESS: INSURER(8) AFFORDING COVERAGE NAIC # DISURER A: Nautilus Insurance Company 17370 INSURED PISURER B: Progressive Commercial Auto 11770 PISURER C: Markel Insurance Company 38970 Food Truck Col INSURER D: INSURER E : INSURER F: COVERAGES CERTIFICATE NUMBER: REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDITEUER TYPE OF INSURANCE **POLICY NUMBER** COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 1,000,000 CLAIMS-MADE V OCCUR 100,000 MED EXP (Any one person) 5,000 03/06/2023 03/06/2024 1,000,000 PERSONAL & ADV MURY GEN'L AGGREGATE LIMIT APPLIES PER 2,000,000 GENERAL AGGREGATE PRO-JECT POLICY PRODUCTS - COMP/OP AGG 8 2,000,000 OTHER: AUTOMOBILE LIABILITY OMBINED SINGLE LIMIT 500,000 ANY AUTO BODILY INJURY (Per person) SCHEDULED AUTOS NON-OWNED AUTOS ONLY OWNED AUTOS ONLY HIRED AUTOS ONLY P 12/11/2022 | 12/11/2023 | BODILY BUJURY (Per socident) 5 PROPERTY DAMAGE (Per accident) Medical Pay \$ 2,000 UMBRELLA LIAB OCCUR **EACH OCCURRENCE** 5 CLAIMS-MADE AGGREGATE DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ✓ PER STATUTE ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) s 500,000 E.L. EACH ACCIDENT N NIA 10/18/2022 10/16/2023 500,000 E.L. DISEASE - EA EMPLOYER \$ If yes, describe under DESCRIPTION OF OPERATIONS below 500,000 E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 191, Additional Remarks Schedule, may be attached if more space is required) The Unified Government of Wyandotte County Kansas City, KS is listed as additional insured, Must provide 10 day prior notice to licensed administrator, CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Unified Government of Wyandotte County Kansas City, Ks AUTHORIZED REPRESENTATIVE 4953 State ave Kansas City KS 66102

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