City of Bronte Application for Mobile Food Vendor Permit

Please complete and sign the following application and mail, email, or deliver it to: City of Bronte, Attn: Mobile Food Vendor Permit Application, P.O. Box 370, 114 S. Washington Street, Bronte, Texas 76933; Email: brontetx@wcc.net.

		PLEASE PRINT		
Name of Applicant	;			
If applicable, name	e of Business: (You are an Agent or	r Employee of):		
Address:			City/State/Zip:	
E-mail:		Facsimile:		
Daytime Phone:		Alternate Phone:		
Driver's License or ID Card No.:		Texas State Sa	Texas State Sales Tax ID No.:	
Additional Users U	Inder Permit:			
Name:		Driver's Licens	Driver's License or ID Card No.:	
Address:		City/State/Zip	City/State/Zip:	
E-mail:		Daytime Phon	Daytime Phone:	
Name:		Driver's License or ID Card No.:		
Address:			City/State/Zip:	
E-mail:			Daytime Phone:	
	copy of your driver's licenses or ot	ther government-issued ide	entification card for all users.	
Vehicle Informatio	on (Vehicle being used during soli Model:			
<u>-</u>	Model:			
	rate sheet if additional vehicles w			
Criminal History In	nformation:			
	/have not been convict e(s):		lony in the last 10 years. If yes, give years	
•	rate sheet to answer these questi	•	rs under the permit.	
Location(s) Where	Applicant Wishes to Sell Food ur	nder this Permit:		
*If private property	y, include written permission from	n private property owner.		
(Initial) Ap	oplicant has received copy of City	of Bronte Soliciting Ordin	ance No. 19-08.	
SIGNATURE OF APPLICANT:				

THE CITY OF BRONTE has approved the following pe	ermit to:
Name of Applicant:	Name of Business:
Permit No	Fee Paid by Applicant:
Date Permit is good for:	Time(s) Permit is good for:
City of Bronte Staff Signature/Date/Time	
	City Seal

Solicitor gets copy of this form to show City of Bronte residents Solicitor gets copy of Soliciting Ordinance No. 19-08

City of Bronte keeps original application