**ITINERANT VENDOR OF FOOD APPLICATION FORM**

Renewal New Application

|  |  |
| --- | --- |
| **Applicant Details** | |
| Name of Applicant: | |
| Business Trading Name: | |
| Address: | |
|  | |
| Telephone (H) (W) (M) | |
| Email Address: | |
| Postal Address: | |
|  | |
| Area/locality of proposed activity: | |
|  | |
|  | |
|  | |
| Nature of proposed activity (including details of goods to be sold and / or services offered): | |
|  | |
|  | |
| Number of assistants/persons other than the Applicant expected to be employed or otherwise engaged in the business: | |
|  | |
| Mobile Van |  |
|  | |
| Vehicle registration number (if applicable): | |
| Proposed hours of operation: | |
| Proposed days/dates of operation: | |
|  | |
| Any other information relevant to this application: | |
|  | |
|  | |
|  | |