

**ITINERANT VENDOR OF FOOD APPLICATION FORM**

 Renewal New Application

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| **Applicant Details** |
| Name of Applicant: |
| Business Trading Name: |
| Address: |
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| Telephone (H) (W) (M) |
| Email Address: |
| Postal Address: |
|  |
| Area/locality of proposed activity: |
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|  |
| Nature of proposed activity (including details of goods to be sold and / or services offered): |
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| 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: |
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