

Updated January 2020

CITY OF ALPHARETTA

MOBILE FOOD VENDOR LICENSE APPLICATION
AND INFORMATION PACKET

The regulations governing the operation of mobile food vendors within the City of Alpharetta are defined in <u>Chapter 10</u>, <u>Article X of the Code of Ordinances of the City of Alpharetta, Georgia</u>. Among other things, the regulations stipulate that it shall be unlawful for any person to sell, or offer for sale, food of any type from a commissary, mobile retail food establishment vendor, ice cream truck, pushcart or temporary food establishment without a license first having been granted under this section, except as part of a city-sponsored or sanctioned special event.

Those wishing to secure a City of Alpharetta Mobile Food Vendor License should, after reading and understanding the aforementioned ordinance, complete this form. <u>Failure to complete this form in its entirety or to provide all required information will result in rejection of the application.</u>

Completion of this form does not guarantee or grant issuance of a Mobile Food Vendor License. The City of Alpharetta reserves the right to not issue or renew a license in cases in which there are documented violations of City Codes and/or Ordinances, other taxes or fees are owed to the City by the business or its owners, or in which the Mobile Food Vendor fails to meet requirements set forth by the City of Alpharetta or applicable county, state, and federal laws.

Section 1: General Business Information

Business Name:				
Federal ID (FEIN):	GA Sales and U	Jse Tax #		
For information, please visit <u>www.irs.gov/businesses/</u>	<u>'small</u> Obta	in from GA Departme	ent of Revenue <u>http://gtc.</u>	dor.ga.gov
Owner's Name:				
Owner's Mailing Address:				
City:			p Code:	
Owner's Phone Number:	Owner's Mobile Phone	Number:		
Operator's Mailing Address:		7;	n Codo:	
City:		Zi	p Code:	
Operator's Phone Number:	Operator's Mobile Pho	one Number:		
Section 2: Mobile Vending Unit Information				
County Health Department Permit Number:		Inclu	de copy of permit with c	pplication.
Type Of Vending Unit: Food Truck Clce Cream Tr	ruck O Push Cart	Commissary	C Temporary Food Es	tablishment
If the unit is a food truck or other vehicle legal for us	e on roadways, pleas	e provide the fol	llowing:	
Vehicle Make: Mode	ıl:	Lic	cense Plate #:	

Section 3: Anticipated Mobile Vending Activity Locations

The regulations governing the operation of mobile food vendors within the City of Alpharetta are defined in <u>Chapter 10</u>, <u>Article X of the Code of Ordinances of the City of Alpharetta, Georgia</u>. Among other things, the regulations stipulate that, except for ice cream trucks, no mobile food vendor shall conduct business or operate in the public right-of-way except as part of a City-sponsored or sanctioned special event. All applicants are cautioned to read and understand <u>Section 10-313 of the Code of Ordinances</u> prior to making application for a City of Alpharetta mobile food vendor license.

For what type of mobile food vending activity are you me	aking application? Please check all that apply
To what type of mobile lood vehicing activity are you in	aking applications Thease check all that apply.
	Mobile Vending On Street
☐ Mobile Vending During City Events	Mobile Vending On Sidewalk
Operation Of An Ice Cream Truck	Ice Cream Trucks must include a copy of their valid Department of Agriculture permit.
Vending Private Property Approval Form as part of this oprivate property for which a Mobile Food Vending Priva	o undertake mobile food vending activities, you must submit a completed Mobile Food application. If you are found to be conducting mobile food vending activities upon any the Property Approval Form has not been provided to the City of Alpharetta, you will be 0-313 of the City Code and your license to conduct mobile food vending activities in the tyou may be subject to fines or other penalties.
Section 4: Attachments And Addendums	
Before submitting your application, please ensure that the	e following documents are attached.
☐ Valid Mobile Food Service Operation Permit From	The Georgia Department Of Agriculture (NOTE: Ice Cream Trucks Only)
☐ Valid Mobile Food Service Operation Permit From	n The Fulton County Health Department
Proof Of Current Liability Insurance	
Completed Private Employer Affidavit Pursuant To	O.C.G.A. § 36-60-6(d)
Completed Affidavit Verifying Legal Immigration S	Status Pursuant To O.C.G.A. § 50-36-1
	Form For Each Private Property Location At Which Vending Will Occur
Payment For Annual License Fee (\$150)	
Section 5: Swear And Attest	
hereby swear and attest that all information provided he agree to abide by all ordinances, rules, and regulations of	f Alpharetta Mobile Food Vendor License I, as a duly authorized agent of the applicant, do rein is complete and accurate to the best of my knowledge. I and the applicant business of the City of Alpharetta and acknowledge that City of Alpharetta personnel may enter my ify compliance with all applicable ordinances, rules, and regulations. I understand that any till void the Mobile Food Vendor License.
Authorized Agent Name (Please Print):	
Signature:	Date:

The City of Alpharetta is required by Georgia Law to view and obtain a copy of Verifiable Identification (e.g. driver's license) at the time this application is submitted. As such, application must be made in person at the Community Development Department at Alpharetta City Hall, which is located at 2 Park Plaza, Alpharetta, GA 30009. Applications are accepted Monday through Friday from 8:30 AM until 3:30 PM.

CITY OF ALPHARETTA PRIVATE EMPLOYER AFFIDAVIT PURSUANT TO O.C.G.A. § 36-60-6(d)

THIS AFFIDAVIT MUST BE NOTARIZED

By executing this affidavit under oath, as an applicant for an Business Occupation License as referenced in O.C.G.A. § 36-60-6(d), from the City of Alpharetta Georgia, the undersigned applicant representing the private employer indicated below verifies the following with respect to my application for the above mentioned document.

Printed Nan	ne Of Private Employer:			
Section 1:	Please select ONE of the following.			
	bys more than ten (10) employees (total emplo Inotarize at the bottom.	yees for Individual, Firm or Corp	poration). Please complete section 2 below and	
C Emplo bottor	bys ten (10) or fewer employees (Individual, Fi n.	irm, or Corporation). Do not con	nplete Section 2. Please sign/notarize at the	
Section 2:	The employer has registered with and uti provisions and deadlines established in federal work authorization user identifica	O.C.G.A. § 36-60-6(a). The	zation program in accordance with the app undersigned private employer also attests t orization are as listed below:	licable hat its
	Federal Work Authorization User Identificat	ion Number	Date Of Authorization	
·	are under penalty of perjury that the foregoing			
Signature of A	Authorized Officer or Agent			
Printed Name	e of Authorized Officer or Agent	Printed Title of Authorized	Officer or Agent	
SUBSCRIBED	AND SWORN BEFORE ME ON THIS THE	DAY OF, :	20	
NOTARY PU	BLIC	My Commission Ex	pires	

CITY OF ALPHARETTA AFFIDAVIT VERIFYING LEGAL IMMIGRATION STATUS

THIS AFFIDAVIT MUST BE NOTARIZED

O.C.G.A. § 50-36-1 states that an agency or political subdivision providing or administering a public benefit shall require every applicant for such benefit to execute a signed and sworn affidavit verifying the applicant's lawful presence in the United States.

By executing this affidavit under oath, as an applicant for a City of Alpharetta public benefit, I hereby state the following with respect to

my appl	ication for (please check one):		
	Occupational Tax Certificate (Business License)	☐ Mobile Food Ver	ndor License
	(insert business name)	(insert business	name)
	Alcoholic Beverage License		
	(insert business name)		
 OR	I am a United States citizen. By executing this affid States as the undersigned applicant is a United States to the undersigned applicant is a United States to the undersigned applicant is a United States as the undersigned as the undersigned applicant is a United State	es citizen 18-years of age or older.	The undersigned applicant has provided at
 OR	I am a legal permanent resident. By executing this United States as the undersigned applicant is a leg provided at least one secure and verifiable docume	al permanent resident 18-years of ag	e or older. <u>The undersigned applicant has</u>
	I am a qualified alien or non-immigrant. By executive United States as the undersigned applicant is a Title 8 U.S.C. with an alien number issued by the Experts of age or older. The undersigned applicant O.C.G.A. § 50-36-2 with this affidavit.	qualified alien or non-immigrant und epartment of Homeland Security or o	ler the federal Immigration and Nationality Acother federal immigration agency, and is 18-
	Applicant's alien number issued by the Depar Security Or other federal immigration agency	ment of Homeland	
I hereby	declare under penalty of perjury that the foregoing	is true and correct.	
Executed	d on,, 20 in	(City) (State)	
Signatur	e of Applicant		
Printed N	Name of Applicant		
SUBSCR	IBED AND SWORN BEFORE ME ON THIS THE	DAY OF, 20	-
NOTAR'	Y PUBLIC	My Commission Expires	_

A complete listing of secure and verifiable documents is available through the Office of the Attorney General (GA) website: http://law.ga.gov/immigration-reports.

^{*}Documents include a U.S. driver's license, U.S. passport, U.S. passport card or one of the other documents listed on the Attorney General's list of Secure and Verifiable Documents.

^{**}Documents include a Permanent Resident card (from I-551), Arrival/Departure Record (form I-94), Employment Authorization Document (form I-766) or one of the other documents listed on the Attorney General's list of Secure and Verifiable Documents.



CITY OF ALPHARETTA

Mobile Food Vending Private Property Owner Approval Form

The regulations governing the operation of mobile food vendors within the City of Alpharetta are defined in Chapter 10, Article X of the Code of Ordinances of the City of Alpharetta, Georgia. Section 10-312 stipulates that mobile food vendors who wish to conduct vending operations from any private property must provide information regarding the anticipated times of such operation as well as location information and the signed consent of the property owner.

Please complete this form for each private property upon which mobile food vending will occur. The completed and notarized form shall be submitted to the City of Alpharetta Department of Community Development, 2 Park Plaza, Alpharetta, GA 30009.

Section 1: Mobile Food Vendor Information Business Name: Owner's Name: Owner's Mailing Address: State: Zip Code: Owner's Phone Number: _____ Owner's Mobile Phone Number: ____ Section 2: Property Information Property Owner's Name: Property Street Address: State: Zip Code: Property Owner's Phone Number: Section 3: Property Owner Consent By affixing my signature below, I, ______, hereby swear and attest that I am the legal owner of the property identified in Section 2: Property Information of this form and that I have the right and authority to grant usage of said property for purpose of operating a mobile food vending business. I, further, confirm that I have granted permission to the business identified in Section 1: Mobile Food Vendor Information of this form to conduct such mobile food vending business on the subject property. Property Owner Signature: NOTARY: Personally appeared before me _ who, under oath, states that he/she is the legal owner of the above listed property and is granting permission for use of said property as herein indicated.

Commission Expires: