



# Mobile Food Vendor Permit Application

City Clerk's Office  
18 East 22nd Street  
Kearney, NE 68847  
308-233-3216  
kearneyclerk@kearneygov.org

MOBILE FOOD VENDOR (APPLICANT) INFORMATION	
Applicant Name:	
Applicant Address:	
Applicant Email Address:	Applicant Phone #:
Mobile Food Unit Registered Name:	
Owner Name and Address: (if different than Applicant)	
Owner Email Address:	Owner Phone #:
Primary Contact:	
Primary Contact Email Address:	Primary Contact Phone #:
Partnership/Inc.: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	
Member Name and Address: (include additional pages as needed)	
Member Email Address:	Member Phone #:
BUSINESS INFORMATION	
Description of Food/Beverage Sold:	
Location of Mobile Food Vendor Unit:	
SUBMISSION REQUIREMENTS	

**Shall be included with application:**

- Copy of valid State of Nebraska Department of Agriculture Food Safety/Consumer Protection Permit;
- Copy of the State of Nebraska Sales Tax Permit or Proof or Applicable Exemption;
- Copy of Applicant's Vehicle Registration;
- Copy of Applicant's valid Driver's License;
- Certificate of Insurance containing required coverages showing the City of Kearney as an Additional Insured. (When located on public property only);
- Permit Fee - \$100.00
- Downtown District Mobile Food Vendor Permit Fee (daily) - \$80.00
- Downtown District Mobile Food Vendor Permit Fee (annually) - \$1,000.00

### APPLICANT ACKNOWLEDGMENT

I, affirm that all answers given and statements made on this application are complete and true to the best of my knowledge and beliefs and further understand that false statements shall be considered sufficient cause for denial and/or revocation of this permit. I have read and understand the terms and conditions outlined in Article 31 of Chapter 3 of the Code of the City of Kearney, Nebraska and further understand that failure to follow the proper regulations may result in my permit being suspended or revoked.

I further affirm that I shall indemnify and hold harmless the City of Kearney and its officers, employees and agents from and against all claims, suits, damages, costs, demands, losses and expenses, direct, indirect or consequential (including but not limited to fees and charges of attorneys and other professionals and court and arbitration costs) arising out of or resulting from the performance under this permit and further understand I am entirely and solely responsible for all acts and the acts of the Applicant's agents and employees while engaged in the operation of the Mobile Food Vendor Unit.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

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**FOR OFFICE USE ONLY**

Received:

- Copy of valid State of Nebraska Department of Agriculture Food Safety/Consumer Protection Permit;
- Copy of the State of Nebraska Sales Tax Permit or Proof or Applicable Exemption;
- Copy of Applicant's Vehicle Registration;
- Copy of Applicant's valid Driver's License;
- Certificate of Insurance containing required coverages showing the City of Kearney as an Additional Insured. (When located on public property only);
- Permit Fee - \$100.00;
- Downtown District Mobile Food Vendor permit fee (daily) - \$80.00
- Downtown District Mobile Food Vendor permit fee (annually) - \$1,000.00

- Approve
- Deny

Reasons for denial: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*City Manager/Designee* *Date*

Please call 308-233-3216 or email [kearneyclerk@cityofkearney.org](mailto:kearneyclerk@cityofkearney.org) with questions.