

Food Truck Application Checklist

_____ Vehicle	Year _____ Make _____ Model _____ Color _____ Vehicle ID no. _____
_____ Affidavit	Sign and deliver
_____ Owner	Name: _____ Address: _____ Phone Number: _____ Driver's License _____
_____ Certificate of Insurance	General Liability Policy must be no less than \$1,000,000.00. May not be cancelled except upon a 30 day written notice delivered to the Village Attorney. Public Liability and Food products coverage showing coverage of not less than \$1,000,000.00. May not be cancelled except upon a 30 day written notice delivered to the Village Attorney.
_____ Proof of Auto Liability Insurance	License will be invalid anytime the insurance is not maintained and evidence of continued coverage is not filed with the village clerk.
_____ WCHD permit	Submit a copy of the Warren County Health Department permit
_____ Fee	\$50.00