

New License Yes No
Change of Location Yes No



Mobile Food Vendor – Private Property and Public Street Right-of-way

Fee: \$150.00 – if filed January 1st through June 30th or \$75.00 - if filed July 1st through December 31st
Application:

1. Name: _____
2. Business/Vendor Name: _____
3. E-mail: _____
4. Mailing Address: _____
5. Phone: _____
6. Vending Location/Address : _____

****Public Street Right of Way vendors are limited to parallel parking spaces only****

7. Hours of Operation (limited to 9 p.m. until 2 a.m.) _____

****Public Street Right of Way vendors are limited to hours of operation 9 p.m. to 2 a.m.****

8. Square Feet of Mobile Device or Structure: _____
9. Food/Beverage Items sold: _____
10. Where will the food be prepared? _____
11. Description of any additional structures to be used in conducting the business, including stairs, tents, or enclosures: (food truck, trailer, tent, etc): _____
12. Where will you be disposing of your grease or other liquid waste? _____

Sections 25-181, 25-186, and 25-187 of the Fort Smith Municipal Code state that no pollutants shall enter into the public owned treatment works system. They shall be properly disposed of at designated sites.

13. Where will you be disposing of your trash? _____

Section 25-300 of the Fort Smith Municipal Code states it shall be unlawful for any person or entity to deposit, or cause to be deposited, any tangible item or material into a commercial container as to which the person or entity does not have express permission to so use the commercial container. Any violation of this section shall be deemed guilty of a misdemeanor subject to the penalties set forth in section 1-9 of the Code.

14. Arkansas Sales and Use Tax ID Number: _____



Skip #15 if you will be setting up on PRIVATE PROPERTY.

Insurance Requirements

15. Do you have your insurance policy? _____

Proof of an insurance policy, issued by an insurance company licensed to do business in the state, protecting the licensee and the city from all claims for damages to property and bodily injury including death, which may arise from operations under or in connection with the license to operate the business in the public right-of-way. Such insurance shall provide that the policy shall not terminate or be cancelled prior to the expiration date without thirty (30) days' advance notice to the city administrator.

The vendor shall obtain Commercial General Liability insurance on an occurrence basis with limits of not less than \$1,000,000 each occurrence, \$1,000,000 personal and advertising injury, \$2,000,000 products and completed operations aggregate, \$2,000,000 general aggregate and \$5,000 expense (any one person). The policy shall name the City of Fort Smith as Primary Additional Insured and include ISO forms CG2010 and CG2037 (or equivalent endorsements).

Vendor shall also provide evidence that ISO endorsement Products/Completed Operations Hazard Redefined-Changes (CG2407) has been added to the policy. Waiver of Subrogation shall apply in favor of the City of Fort Smith.

16. A statement that the vendor/insured shall hold the City harmless from and indemnify the city for all expenses, losses, cost, causes of action and judgments, including legal expense, arising from the vendor's/insured's' operations.

Below is an excerpt from the Mobile Food Vending Ordinance regarding trash removal, prohibited conduct, and location restrictions. Please acknowledge by initialing here _____ that you understand and agree to abide by the following sections.

Littering and Trash Removal

1. Mobile food vendors shall keep the sidewalks, roadways, property where the vendor is located and other locations adjacent to their vending site clean and free of debris and refuse generated from the operation of their business.
2. Mobile food vendors shall provide a receptacle for litter that shall be maintained and emptied regularly.

Private Property Only



If you own the property - Please leave this page blank.

Landlord Permission Sheet

To the City of Fort Smith Planning Department:

I hereby grant my permission to to Operate

business at By signing this form, I verify that I am the

owner of this property.

Owners Printed Name

Address

<input type="text"/>	<input type="text"/>
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Owners Signature

Date



Prohibited Conduct

No person authorized to engage in the business of mobile food vending under these regulations shall do any of the following:

1. Locate in any residential zoning district.
2. Locate within a site triangle described as the area delineated by a distance of twenty-five (25) feet along the intersecting property lines, beginning at a property corner point and extending twenty-five (25) feet in both directions away from the corner point of an intersection and then connecting the terminus points by a line to form the triangular area.
3. No mobile food vendor shall sell or vend from his/her vehicle within 300 feet of a public or private school property while school is in session and one hour before and after school is in session; classes or school related events, except when authorized in writing by the school.
4. Unduly obstruct pedestrian or motor vehicle traffic flow, except a reasonable time to load and unload the mobile food vendor vehicle.
5. Obstruct traffic signals or regulatory signs.
6. Stop, stand or park any mobile food vendor upon any street for the purpose of selling during the hours when parking, stopping and standing have been prohibited by signs or curb markings.
7. Leave any mobile food vehicle in a public street right-of-way overnight.
8. Sounds projecting from the mobile food vendor that violate Article II – Noise regulations of the Fort Smith Code of Ordinances.
9. Conducting the business in such a way that would restrict or interfere with the ingress or egress of the abutting property owner or tenant, create traffic congestion or delay, constitute a hazard to traffic, life or property, or obstruct adequate access to emergency and sanitation vehicles.
10. Use or install any lighting that does not comply with Section 27-602-5 Commercial and Outdoor Lighting requirements of the Unified Development Ordinance.
11. Run hoses, cords, or other apparatus across a pedestrian pathway or sidewalk.
12. Utilize any portion of a public sidewalk or public right-of-way where mobile food vending is not allowed or authorized.
13. Remove the wheels from a mobile food vehicle. The mobile food vehicle shall not otherwise be rendered immobile such as being placed on blocks, railroad, ties, etc.



Location Restrictions

No vendor within the Commercial Downtown (C-6) zoning district on public right-of-way shall be permitted to operate in the following areas:

1. Within 10 feet of any street intersection or pedestrian crosswalk.
2. Within 10 feet of any driveway, loading zone or bus stop.
3. Within 10 feet of any fire hydrant or fire escape.
4. Within 10 feet of any parking space or access ramp designated for persons with disabilities
5. Angled on-street parking spaces.
6. Within 50 feet of a driveway to police or fire station.
7. Within 50 feet of the principal public entrance to a food service establishment not owned by mobile food vendor, unless written permission has been given by the food service establishment, or the food service establishment is closed for business.
8. Any area that obstructs pedestrian traffic.
9. No customer shall be served on the street side of the mobile unit. All service must occur on curb side when the mobile unit is abutting a public street.
10. No drive thru or drive-by customer service shall be provided or permitted as part of a mobile food vendor business.
11. No mobile food vendor shall conduct business so as to violate any ordinances of the city regulating traffic and rights-of-way now in effect or hereafter amended.
12. No seating or signage shall be provided or permitted in a street right-of-way or public sidewalk as part of a mobile food vendor business.
13. No mobile food vendor shall sell or vend from his/her vehicle within 300 feet of a public or private school property while school is in session and one hour before and after school is in session; classes or school related events, except when authorized in writing by the school.
14. In the public street right-of-way on the designated truck route.
15. In the public street right-of-way of a state highway (Garrison Avenue, Towson Avenue, Rogers Avenue (east of Towson Avenue), North 10th Street, and North 11th Street).
16. In any parallel parking space that is designated as reserved.



Revocation of Permit

I understand that my license may be revoked for any of the following reasons:

1. Any fraud, misrepresentation or false statement contained in the application for license;
2. Any fraud, misrepresentation or false statement made in connection with selling of products;
3. Any violation of this Section;
4. Conducting the business license under this Section in an unlawful manner or in such a manner as to constitute a breach of the peace or to constitute a menace to the health, safety or general welfare of the public.

Signature_____

17. Please submit a scaled drawing, photo, or written documentation verifying the dimensions of the mobile food vehicle and/or trailer.

APPLICANT/VENDOR: I certify that the foregoing statements and answers herein made, all data, information, and evidence herewith submitted are in all respects, to the best of my knowledge and belief, true and correct. I understand that submittal of incorrect or false information is grounds for invalidation of application completeness, determination, or approval. I understand that the City might not approve my application, or might set conditions for approval.

NAME (PRINTED):_____ Date:_____

Signature:_____

SCHOOL REPRESENTATIVE: If located within 300 feet of a public or private school.

NAME (PRINTED):_____ Date:_____

Signature:_____



**CITY OF FORT SMITH
UTILITY DEPARTMENT
ENVIRONMENTAL QUALITY DEPARTMENT
WASTE SURVEY – SHORT FORM**

This survey is intended to obtain information needed by the City of Fort Smith to comply with state and federal Pretreatment requirements. Failure to submit a complete and accurate survey may result in penalties including the termination of service. The City may verify the data submitted through phone calls, site inspection, and sample analysis. Answer each question accurately to reflect existing conditions and conditions proposed to occur within 3 to 5 years. Attach additional sheets as necessary.

DIRECTIONS FOR COMPLETING THIS INDUSTRIAL WASTE SURVEY FORM

1. Fill out Waste Survey form completely. Answer all questions. If you do not know the answer to a question, write "Unknown" in the box. If an answer is not applicable to your facility, write "N/A".
2. Sign the Waste Survey form (see back page). Must be signed by an Authorized Representative of the User.
3. Failure to submit a complete Waste Survey form or to submit the form *within thirty (30) business days* is a violation of the City's Ordinance 27-16.
4. Fill out using ink. Do not use a pencil. Write clearly.
5. If you have any questions, please contact the City at: 479-784-2335 or 479-784-2337 or 479-494-3938 or email tgarris@fortsmithar.gov

GENERAL INFORMATION

Company Name and d.b.a. Business Name, if different	
Name of responsible person at the facility authorized to represent the company in official dealings with the City of Fort Smith.	
Title:	Phone:
Non business hours contact:	Phone:
Email Address (if available):	Physical Street Address of Facility:
Website (if available):	Official Mailing Address if Different:

List all Standard Industrial Classification (SIC) codes or North American Industrial Classification System (NAICS) for your facility. These may be found on Federal tax forms or accounting records.

TYPE OF BUSINESS (CHECK ALL THAT APPLY)

<input type="checkbox"/> Manufacturing/Production	<input type="checkbox"/> Distribution/Warehouse	<input type="checkbox"/> Retail Sales – Non-Food
<input type="checkbox"/> Service	<input type="checkbox"/> Office Only	<input type="checkbox"/> Retail Sales – Food
<input type="checkbox"/> Medical/Dental/Veterinarian	<input type="checkbox"/> Other ^(Please Explain) :	

BUSINESS ACTIVITIES

Date Business began at this site:			
Construction date(s) for building(s) at site:			
Normal operating schedule days of week:	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun
Normal operating schedule hours per day:	1st Shift	2nd Shift	3rd Shift
Number of employees per shift:	1st Shift	2nd Shift	3rd Shift
Water Consumption (Gallons/Month):		Estimate <input type="checkbox"/>	Actual <input type="checkbox"/>
Wastewater Volume Generated (Gallons/Month):		Estimate <input type="checkbox"/>	Actual <input type="checkbox"/>

BUSINESS ACTIVITIES (CONTINUED)

Describe in detail the type of business activity conducted at this site. Please include primary products or services (attach additional sheets as necessary):

Is the facility a non-manufacturing, non-production retail facility or business office that does not perform any medical or dental services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the facility/business a food service establishment, prepares food for sale or consumption, or generates FOG (fats,oils,&grease)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the facility perform or provide any medical services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the facility perform or provide any dental services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does this pharmacy/facility perform custom compounding of pharmaceutical drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the business a manufacturing, production, or processing facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the facility perform metal finishing, metal plating, metal manufacturing, or any other known categorical process?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SIGNATURE SECTION

The Authorized Representative for the Business shall sign this survey and return it within thirty (30) days to:

Environmental Monitoring Supervisor
 City of Fort Smith
 801 Carnall Avenue, Suite 500
 Fort Smith, AR 72901

"I certify under penalty of law that this document and all attachments were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based upon my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment for knowing violations."

 Printed Name of Authorized Representative from Page 1

 Title

 Signature of Authorized Representative from Page 1

 Date

The signing official must have authorization to provide such information on behalf of the company, corporation or partnership. In accordance with Arkansas law, information and data provided in the questionnaire may be available for public review under the Freedom of Information Act. Requests for confidential treatment of the information will be governed by procedures specified by the City's Pretreatment Program and the Freedom of Information Act.



FOR INTERNAL USE ONLY:

- Zoning District: _____
- Proximity to public or private school: _____
- At least 10 feet of any street intersection or pedestrian crosswalk: _____
- At least 10 feet of any driveway, loading zone or bus stop: _____
- At least 10 feet of any fire hydrant or fire escape: _____
- At least 10 feet of any parking space or access ramp designated for persons with disabilities: _____
- Parallel parking space (can only occupy two parallel spaces if the vendor is utilizing a concession trailer and the tow vehicle is connected at all times): _____
- At least 50 feet of a driveway to police or fire station: _____
- At least 50 feet of the principal public entrance to a food service establishment not owned by mobile food vendor, unless written permission has been given by the food service establishment, or the food service establishment is closed for business: _____
- Does not obstruct pedestrian traffic: _____
- Does not have seating or signage in a street right-of-way or public sidewalk: _____
- Not within the designated truck route: _____
- Not within the public street right-of-way of a state highway (Garrison Avenue, Towson Avenue, Rogers Avenue (east of Towson Avenue), North 10th Street, and North 11th Street): _____
- Not within any parallel parking space that is designated as reserved: _____