



City of Carbondale  
234 Main Street, PO Box 70  
Carbondale, Kansas 66414  
Phone: 785-836-7108 Fax: 785-836-7942

## MOBILE FOOD VENDORS APPLICATION

Name of Business: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Web and/or Email Address: \_\_\_\_\_

\_\_\_\_\_

Kansas State Sales Tax Number: \_\_\_\_\_ *(Required)*

Name of Vehicle Owner: \_\_\_\_\_

Type, Make and Registration Number of Vehicle(s): \_\_\_\_\_

\_\_\_\_\_

Please provide a brief description of the nature of the business and the food/beverage

being offered for sale: \_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ the above-named applicant, affirm that all information  
contained in the above application is accurate, complete and true.

\_\_\_\_\_

Applicant Signature

Required documentation

Please provide a copy of the following paperwork  
with a completed mobile food vendor application

- Mobile Food Unit License** from the Kansas Department of Agriculture (KDA)
- Retailers' Sales Tax Registration Certificate** from Kansas Department of Revenue
- Commercial Auto Insurance**
- A copy of your most recent KDA inspection report**

**Food Truck \$30.00 (Thirty Dollars) per day OR \$100 per calendar year.**