

APPLICATION FOR MOBILE FOOD VENDORS
VILLAGE OF DOWNERS GROVE, ILLINOIS

Permit Type (check which applies)

Business Parks ONLY:

*Business Parks AND Public Parks:

*Vendors/Applicants who operate in public parks must have written consent from the Downers Grove Park District, and must submit to a fingerprint background check by a State approved agency at the cost of the owner/applicant.

Permit Fee: \$100 for COMPLETED Applications

1. NAME OF MOBILE FOOD VENDOR _____
Address _____
City, State, Zip _____
Telephone _____
CONTACT PERSON/MANAGER _____
Direct phone number and e-mail address for contact person _____

FORM OF BUSINESS (check only one)

Corporation

Individual Owner

Partnership

2. FOR CORPORATION, must attach a copy of current certificate of good standing from the State of Illinois
Name of registered agent _____
Address _____
City, State, Zip _____
Telephone _____

List each person owning, directly or indirectly, five per cent or more, use a separate sheet if needed.

Name _____
Address _____
City, State, Zip _____
Telephone _____
Date of Birth _____ Driver's License Number _____
Social Security Number _____ Percentage of ownership _____

Name _____
Address _____
City, State, Zip _____
Telephone _____
Date of Birth _____ Driver's License Number _____
Social Security Number _____ Percentage of ownership _____

MANAGER OF BUSINESS

Name _____
Home Address _____
Home Phone _____ Date of Birth _____
Driver's License Number _____ Social Security Number _____

3. If PARTNERSHIP list each partner, use a separate sheet if needed.

Name _____
Address _____
City, State, Zip _____
Telephone _____ Date of Birth _____
Driver's License Number _____ Social Security Number _____

Name _____
Address _____
City, State, Zip _____
Telephone _____ Date of Birth _____
Driver's License Number _____ Social Security Number _____

Name _____
Address _____
City, State, Zip _____
Telephone _____ Date of Birth _____
Driver's License Number _____ Social Security Number _____

Name _____
Address _____
City, State, Zip _____
Telephone _____ Date of Birth _____
Driver's License Number _____ Social Security Number _____

MANAGER OF BUSINESS

Name _____
Home Address _____
City, State, Zip _____
Telephone _____ Date of Birth _____
Driver's License Number _____ Social Security Number _____

For numbers 4, 5, and 6, please provide, on a separate sheet, the requested information for each owner/partner.

4. Have you been convicted within the past ten (10) years of a felony? _____
If yes, type, date and jurisdiction _____
5. Have you been convicted of a misdemeanor involving any of the following offenses:
- (a) Unlawful possession with the intent to deliver: any controlled substance, as such term is defined in the Illinois Controlled Substances Act (720 ILCS 570/100 et seq.), as amended from time to time; or cannabis, as defined in the Cannabis Control Act (720 ILCS 550/1 et seq.), as amended from time to time; or an intoxicating compound, as listed or defined in the Intoxicating Compounds Act (720 ILCS 690/0.01 et seq.), as amended from time to time, with the past five (5) years? _____
 - (b) Unlawful possession of any controlled substance, cannabis or intoxicating compound within the past five (5) years? _____
 - (c) Any offense involving moral turpitude, including, but not limited to any offense involving the misapplication, misappropriation or misuse of funds or another person within the past five (5) years? _____
 - (d) Driver's license suspended or revoked in any state within the past three (3) years as consequence of violations of law concerning the operation of a motor vehicle? _____
6. Are you required to register as a sex offender as required by the Sex Offender Registration Act, 730 ILCS 150 or have you been convicted of criminal sexual assault and/or criminal sexual abuse, as such offenses are defined in the Illinois Criminal Code (720 ILCS 5/1-1 et seq.), or any like offense of another state or country? _____

Pursuant to Chapter 8.16.2, the applicants and any employees or agents will be required to submit the following with the completed application:

- A check for \$100 permit fee
- Food Truck Inspection by DGF
- A current certificate of company insurance
- A copy of the DuPage County Health Department permit
- A list of all employees who will work in the mobile food vehicle
- Menu(s)
- Signed Hold Harmless statement
- Mobile Food Vehicle Registration
- Waiver to conduct background check
- Fingerprints taken by State approved Agency (if applying to operate in public parks)
- Certificate of Good Standing (if registered as a corporation)

I hereby authorize without reservation, any law enforcement agency, administrator, state agency, federal agency, institution, information service bureau, or employer contacted by the Village of Downers Grove to furnish the above mentioned information.

I further acknowledge that a telephonic facsimile (fax) or a photographic copy of this document shall be as valid as the original.

I certify that the information provided herein is true and correct.

SIGNATURE OF APPLICANT

Date

Subscribed and sworn to before
me on this ___ day of ___, 20__.

Return this application to:

The Village of Downers Grove
801 Burlington Avenue
Downers Grove, IL 60515
Attn: Village Manager's Office

Notary Public



HOLD HARMLESS/INDEMNIFICATION AGREEMENT:

_____ has requested permission to operate as
(Name of Applicant)

a Food Truck Vendor in the Village of Downers Grove. For consideration of such
permission and permit, _____

(Name of Organization)

hereby fully releases and discharges the Village of Downers Grove , its officers,
agents and employees from any and all claims from injuries, including death,
damages, or loss which may arise or which may allege to have a risen out of, or in
connection with the event.

_____ further agrees to indemnify and

(Applicant and Organization)

hold harmless and defend the Village of Downers Grove, its officers, agents, and
employees from any and all claims resulting from injuries, including death,
damages or losses, including, but not limited to the general public, which may
arise or which may be alleged to have arisen out of, or in connection with this
event.

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Print Name

Date

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Signature of Applicant

Signature of Notary

WAIVER TO CONDUCT BACKGROUND INVESTIGATION

In connection with my application, I hereby consent to a complete background investigation to be conducted on myself. I understand that this background investigation may include, but is not limited to education history, driving record, criminal history, and references.

I hereby authorize without reservation, any law enforcement agency, administrator, state agency, federal agency, institution, information service bureau, or employer contacted by the Village of Downers Grove to furnish the above mentioned information.

I further acknowledge that a telephone facsimile (fax) or a photographic copy of this document shall be valid as the original.

Signature

Date

Print Name



FOOD TRUCK INSPECTION

DATE: _____ PERMIT # _____

BUSINESS NAME: _____ OWNER: _____

BUSINESS ADDRESS: _____

PHONE: _____ EMAIL: _____

LICENSE PLATE: _____

INSPECTION POINTS:

LP TANKS

- 1. LP/CNG : ___ 1-40 LP TANK _____ 2-20 POUND LP TANKS
- 2. LP LOCATION AND SECURED : ___ REAR BUMPER _____ CABINET (VENTED)
- 3. LP SHUT OFFS (LABELED) ___ YES ___ NO
- 4. LP LEAK DETECTOR ___ YES ___ NO

APPLIANCES

- 1. ALL APPLIANCES UL, NSF, ETL LABELED ___ YES ___ NO
- 2. SPLATTER GUARD BETWEEN FRYERS AND OPEN FLAME ___ YES ___ NO
- 3. FRYERS THERMOSTAT CONTROLLED ___ YES ___ NO
- 4. APPROVED COVERS FOR FRYERS WHEN IN TRANSIT ___ YES ___ NO

HOOD AND SUPPRESSION SYSTEM

- 1. TYPE 1 HOOD OVER APPLIANCES PRESENT (WHERE REQUIRED) ___ YES ___ NO
- 2. CORRECT FILTERS IN PLACE ___ YES ___ NO
- 3. HOODS CLEAN OF EXCESSIVE GREASE ___ YES ___ NO
- 4. SUPPRESSION SYSTEM PRESENT ___ YES ___ NO
- 5. CURRENT INSPECTION TAG ON SYSTEM ___ YES ___ NO
- 6. MANUAL PULL READILY ACCESSIBLE ___ YES ___ NO

FIRE EXTINGUISHERS

- 1. MINIMUM OF 1 – 2A 10 BC EXTINGUISHER (CURRENT INSPECTION TAG) ___ YES ___ NO
- 2. TYPE "K" FIRE EXTINGUISHER (CURRENT INSPECTION TAG) ___ YES ___ NO

ELECTRICAL

- 1. ELECTRIC PANELS ACCESSIBLE ___ YES ___ NO
- 2. EXPOSED WIRING ___ YES ___ NO
- 3. EXTENSION CORDS NOT USED AS PERMANENT WIRING ___ YES ___ NO

GENERATORS

- 1. MOUNTED ON BOARD ___ GAS _____ LP _____ DIESEL _____
IF NOT FUELED BY VEHICLE NO EXTRA FUEL CANS CAN BE STORED ON VEHICLE.
- 2. IF IN CABINET PROPER VENTING IS PRESENT ___ YES ___ NO



FOOD TRUCK INSPECTION

INTERIOR

1. CARBON MONOXIDE DETECTOR PRESENT AND WORKING YES NO
2. ALL EGRESS POINTS UNENCUMBERED YES NO

OTHER REQUIREMENTS

1. VEHICLES SHALL BE PARKED AT LEAST 10 FEET FROM ALL BUILDINGS AND OTHER MOBILE FOOD VENDORS
2. VEHICLE SHALL BE PARKED SO AS NOT TO BLOCK FIRE HYDRANTS, FIRE LANES, FIRE DEPARTMENT CONNECTIONS, EXITS, ETC.
3. COOKING OIL SHALL BE LET COOL FOR 30 MINUTES BEFORE MOVING VEHICLE
4. THE VEHICLE SHALL NOT BE PARKED NEAR SOURCES OF HEAT, OPEN FLAME, OR SIMILAR SOURCES OF IGNITION, OR NEAR UNVENTILATED PITS.

INSPECTOR

OPERATOR

DOWNERS GROVE FIRE PREVENTION

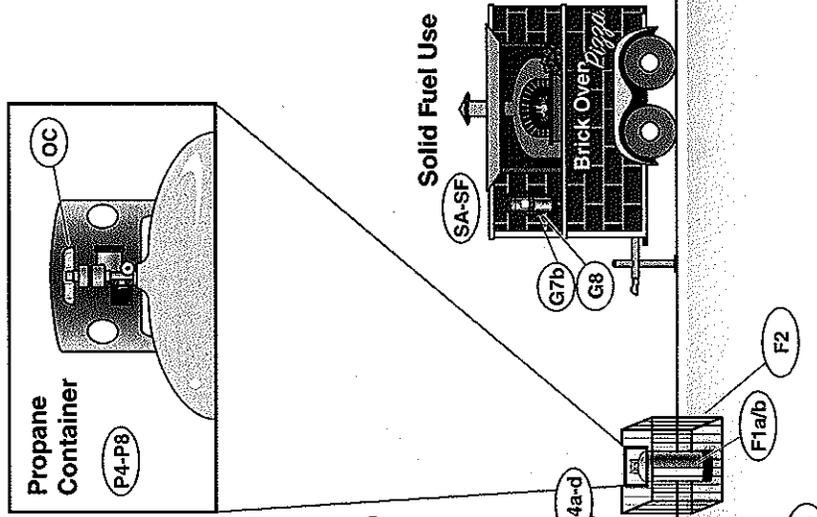
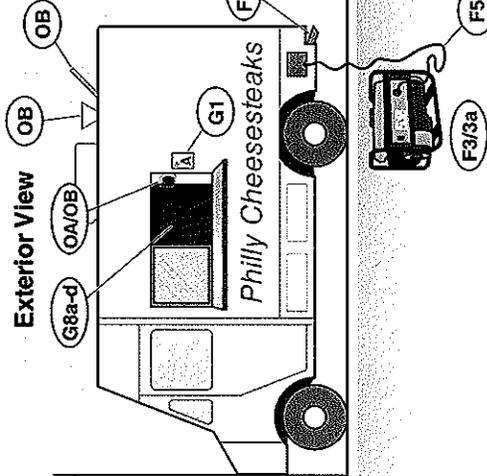
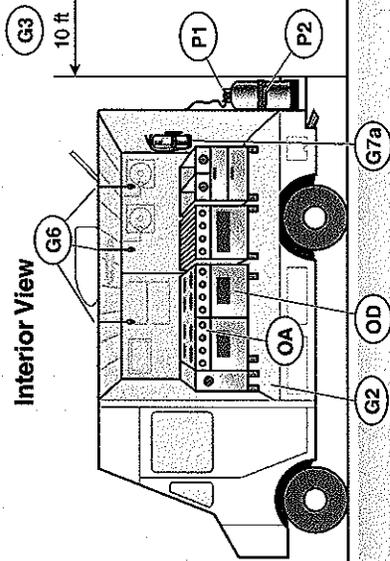
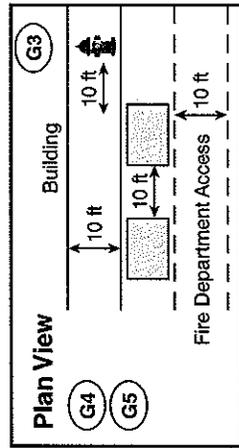
5420 MAIN ST

DOWNERS GROVE, IL 60515

630-434-5983



FACT SHEET » Food Truck Safety



NOTE: This information is provided to help advance safety of mobile and temporary cooking operations. It is not intended to be a comprehensive list of requirements for mobile and temporary cooking operations. Check with the local jurisdiction for specific requirements. This safety sheet does not represent the official position of the NFFPA or its Technical Committees. The NFFPA disclaims liability for any personal injury, property, or other damages of any nature whatsoever resulting from the use of this information. For more information, go to nffpa.org/foodtrucksafety.

NATIONAL FIRE PROTECTION ASSOCIATION
 The leading information and knowledge resource on fire, electrical and related hazards



FACT SHEET » Food Truck Safety (continued)

NFPA code references are provided at the end of each item. The red keys correspond to the NFPA food truck safety diagram. For more detailed information, see Annex B in NFPA 96.

GENERAL SAFETY CHECKLIST

- Obtain license or permits from the local authorities. [1:1.12.8(a)] **G1**
- Ensure there is no public seating within the mobile food truck. **G2**
- Check that there is a clearance of at least 10 ft away from buildings, structures, vehicles, and any combustible materials. [96:7.8.2; 96:7.8.3 for carnivals only] **G3**
- Verify fire department vehicular access is provided for fire lanes and access roads. [1:18.2.4] **G4**
- Ensure clearance is provided for the fire department to access fire hydrants and access fire department connections. [1:13.1.3; 1:13.1.4; 1:13.1.5] **G5**
- Check that appliances using combustible media are protected by an approved fire extinguishing system. [96:10.1.2] **G6**
- Verify portable fire extinguishers have been selected and installed in kitchen cooking areas in accordance with NFPA 10. [96:10.9.3] **G7a**
- Where solid fuel cooking appliance produce grease-laden vapors, make sure the appliances are protected by listed fire-extinguishing equipment. [96:14.7.1] **G7b**
- Ensure that workers are trained in the following: [96:B.15.1]: **G8**
 - Proper use of portable fire extinguishers and extinguishing systems [10:1.1.2] **G8a**
 - Proper method of shutting off fuel sources [96:10.4.1] **G8b**
 - Proper procedure for notifying the local fire department [1:10.14.9 for carnivals only] **G8c**
 - Proper procedure for how to perform simple leak test on gas connections [58:6.16, 58:6.17] **G8d**

FUEL & POWER SOURCES CHECKLIST

- Verify that fuel tanks are filled to the capacity needed for uninterrupted operation during normal operating hours. [1:10.14.10.1 for carnivals only] **F1a**
- Ensure that refueling is conducted only during non-operating hours. [96:B.18.3] **F1b**
- Check that any engine-driven source of power is separated from the public by barriers, such as physical guards, fencing, or enclosures. [96:B.16.2.2] **F2**
- Ensure that any engine-driven source of power is shut down prior to refueling from a portable container. [1:11.7.2.1.2] **F3**
- Check that surfaces of engine-driven source of power are cool to the touch prior to refueling from a portable container. **F3a**
- Make sure that exhaust from engine-driven source of power complies with the following: **F4**
 - At least 10 ft in all directions from openings and air intakes [96:B.13] **F4a**
 - At least 10 ft from every means of egress [96:B.13] **F4b**
 - Directed away from all buildings [1:11.7.2.2] **F4c**
 - Directed away from all other cooking vehicles and operations [1:11.7.2.2] **F4d**
- Ensure that all electrical appliances, fixtures, equipment, and wiring complies with the NFPA 70®. [96:B.18] **F5**

PROPANE SYSTEM INTEGRITY CHECKLIST

- Check that the main shutoff valve on all gas containers is readily accessible. [58:6.26.4.1(3)] **P1**
- Ensure that portable gas containers are in the upright position and secured to prevent tipping over. [58:6.26.3.4] **P2**
- Inspect gas systems prior to each use. [96:B.19.2.3] **P3**
- Perform leak testing on all new gas connections of the gas system. [58:6.16; 58:6.17] **P4**
- Perform leak testing on all gas connections affected by replacement of an exchangeable container. [58:6.16; 58:6.17] **P5**
- Document leak testing and make documentation available for review by the authorized official. [58:6.26.5.1(M)] **P6**
- Ensure that on gas system piping, a flexible connector is installed between the regulator outlet and the fixed piping system. [58:6.26.5.1(B)] **P7**
- Where a gas detection system is installed, ensure that it has been tested in accordance with the manufacturer's instructions. [96:B.19.2.1] **P8**

OPERATIONAL SAFETY CHECKLIST

- Do not leave cooking equipment unattended while it is still hot. (This is the leading cause of home structure fires and home fire injuries.) **OA**
- Operate cooking equipment only when all windows, service hatches, and ventilation sources are fully opened. [96:14.2.2; 96:14.2.3] **OB**
- Close gas supply piping valves and gas container valves when equipment is not in use. [58:6.26.8.3] **OC**
- Keep cooking equipment, including the cooking ventilation system, clean by regularly removing grease. [96:11.4] **OD**

SOLID FUEL SAFETY CHECKLIST (WHERE WOOD, CHARCOAL, OR OTHER SOLID FUEL IS USED)

- Fuel is not stored above any heat-producing appliance or vent. [96:14.9.2.2] **SA**
- Fuel is not stored closer than 3 ft to any cooking appliance. [96:14.9.2.2] **SB**
- Fuel is not stored near any combustible flammable liquids, ignition sources, chemicals, and food supplies and packaged goods. [96:14.9.2.7] **SC**
- Fuel is not stored in the path of the ash removal or near removed ashes. [96:14.9.2.4] **SD**
- Ash, cinders, and other fire debris should be removed from the firebox at regular intervals and at least once a day. [96:14.9.3.6.] **SE**
- Removed ashes, cinders, and other removed fire debris should be placed in a closed, metal container located at least 3 ft from any cooking appliance. [96:14.9.3.8] **SF**

NFPA RESOURCES

NFPA 1. Fire Code, 2015 Edition
 NFPA 1 Fire Code Handbook, 2015 Edition
 NFPA 58, Liquefied Petroleum Gas Code, 2017 Edition
 LP-Gas Code Handbook, 2017 Edition
 NFPA 70®, National Electrical Code® 2017 Edition
 National Electrical Code® Handbook, 2017 Edition

NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, 2017 Edition
 NFPA 96: Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations Handbook, 2017 Edition

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