



CITY OF HIGHLAND APPLICATION FOR ICE CREAM VENDOR

_____	APPLICATION	FEE: \$ 165.00
_____	LIVE SCAN	FEE: \$ 34.00 (per person)
_____	AB 1379	FEE: \$ 4.00
		TOTAL: \$ 203.00

Application is hereby made for a City of Highland license to engage in the business of selling ice cream from a cart or vehicle. Each vehicle must have it's own business license and the driver or operator must carry ID at all times. Ice cream vendors licenses are for the sale of ice cream, candy, soda's and other edible snacks only. Lighters, fake guns, laser pointers, smoke bombs, safe and sane fireworks and other gadgets are not allowed!

- Requirements:
- _____ Current California driver's license
 - _____ Automobile liability insurance for ice cream truck/van
 - _____ Fictitious business name filed with San Bernardino County
 - _____ Copy of Health permit issued from San Bernardino County
 - _____ Live Scan- Each driver must apply for Live Scan Fingerprints
- *Call Highland Police Dept. to schedule appointment

Section 1

Applicant's legal name, home address, and phone number:

() _____ () _____
Home phone number Cell phone number

If your business is based in another city, please list business address and phone numbers

() _____ () _____
Business phone number Business fax number

Section 2

Location where Ice Cream Truck/cart is stored:

Specific locations and times of day applicant intends to sell ice cream:

This page should be filled out separately for each person working. Live scan fees per person also required.

Section 3

Age: _____

Date of Birth: _____

Hair Color: _____

Eye Color: _____

Weight: _____

Height: _____

Section 4

Social Security number

Nicknames or aliases currently or previously used

Place of Birth

Do you have a permit to carry a concealed weapon?

Yes

No

If yes, give date and place of issuance of permit:

Section 5

List all criminal convictions, including offense, date, and sentences. *Omit traffic and parking offenses

Are you required to register as a sex offender under Penal Code Section 290?

Yes _____

No _____

If yes, give details:

Section 6

I hereby apply for one of the following exemptions and have submitted valid proof:

_____ Disability

_____ Under 18- Parent permission required

I declare under penalty of perjury, by signing as (one of) the owner(s), principal officer(s) listed that this application, including attachments, has been examined by me, and to the best of my believe to be true, accurate, and complete of all facts. I further certify that the above business will be conducted in compliance with the applicable provisions of the City of Highland Municipal Codes Ordinances including state and federal laws. In addition, I assume responsibility to reapply for this license on an annual basis and pay the license fees on time. I understand that I may have the revoked due to non-compliance of the conditions set forth by the City of Highland. I also agree to the City of Highland of any and all changes in business status relating to this application. As a will send you a reapply notice. If you do not receive the notice, it is your responsibility to reapply by

_____ Applicant Signature

_____ Date

HIGHLAND POLICE DEPARTMENT NOTES:

I have investigated this application and recommend it be :

_____ Approved

_____ Denied

Notes:

Detective Signature: _____

Date: _____

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