Moblie Food Establishment Operator License Application
Pursuant to Middleton General Ordinance 7.01

1. Applicant Information

Last Name	First Name	M. Initial	Other names used

Driver's License Number	Street Address	City, State Zip

Home Phone	Mobile Phone	Email Address

Sex	Height	Weight	Hair Color	Eye Color	Birth Date

Are you a resident of Wisconsin? _____

If "no" which state are you a permanent resident of? _____ How long? _____

2. Arrests and Convictions

List all offenses for which you have been charged or convicted. This list is to inlcude all felony, misdemeanor, forfeiture, and ordance violations, including traffic citations. The ommission of offenses wil result in denial of your permit. If you have none, intial here _____.

Year	Location	Nature of offense

3. Business Information

Business Name	Phone

Street Address	City, State Zip	Email Address

Please attach a copy of the following with your application:

- ☐ Driver's License or proof of Identity
- ☐ Photograph (approx 2x2) showing heald and shoulders of applicant (not more than 1 yr old)
- ☐ Applicant's fingerprints taken by any authorized law enforcement agency

I have read and agree with the ordinances of the City of Middleton pertaining to the licensing and regulating of mobile food establishments in the City of Middleton. I agree to abide by these and all other ordinances in the City and the laws of the State of Wisconsin. I affirm that I have made complete and true answers to each question and understand that incomplete or false answers may result in denial or revocation of permit. I authorize a reiew of and full disclosure of any and all records, files, and reports, which include any police contact as well as arrests. I understand that if this license is not issued, fees that have been paid will not be refunded.

Signature _____ Date _____

Fees: The permit fee for a moblie food operator's license is $100.00 per year. The permit shall be good from January 1 through December 1 of the year for which the permit is granted.

Office Use Only Application and Fees accepted by _____ Date _____

In regards to the issuance of this license, the Middleton Police Department:

_____ approved _____ denied _____

Signature Date

Operator's License Number _____ _____ **12/31/2016**

Effective Date Expiration Date

7426 Hubbard Avenue, Middleton WI 53562
(608)821-8350 Fax: (608)827-1057