

#### Refreshment Vehicle Owner Licence Application

Date Received:		Licence N	umber:		
A. Refreshment Vehicle Owner Lie	_				
☐ New ☐ Type 1 (Motor Vehicle) ☐ Type	] Renewal 2 (Trailer/Cart) □ Type	3 (Muscle P	owered C	art) Type 4 (Food	1 Truck)
B. Application Requirements:	Z (Trailer/Cart) Type	s o (Muscle 1	owered C	7 Type 4 (1 000	a ridek)
The following documents must be inc	luded with this application	າ:			
☐ Proof of Canadian Citizenship, or a la	anded immigrant or produce	a valid work p	ermit		
☐ Proof of photo identification					
List of all Refreshment Vehicle Opera	tors affiliated with the Refre	shment Vehicle	e Compan	y, the list shall include th	ne following:
☐ Full name of vehicle Operator					
☐ Criminal Record Check issued wit	hin 30 days of application				
Certificate of general liability insuranc additional insured	e in the amount of two million	on dollars(2,00	0,000) nan	ning the Town of Newma	arket as an
Certificate from the York Region Medi (New only)	ical Officer of Health indicati	ing that the Re	freshment	Vehicle complies with a	II regulations
☐ Written permission from the Director of	of Recreation and Culture or	his designate	if operatin	g on Town property	
☐ Written permission from the property of	owner if operating on Private	e property			
All new applications shall be acco	ompanied by a non-refund	dable \$50.00	applicatio	on processing fee	
☐ Fee					
Additional Requirements for Type 1 ( I	Motor Vehicle) & Type 4 (F	ood Truck)			
☐ Current valid Class "G" Ontario Dr	river's Licence				
☐ Drivers abstract current within 30	days of application				
☐ List of Refreshment Vehicles affil	iated with the Refreshme	ent Vehicle Co	ompany, t	he list shall include th	e following:
☐ Vehicle ownership					
☐ Safety Standards Certificate issue	ed within 30 days of applicat	ion			
☐ Certificate of automobile insuranc	e in the amount of two millio	on dollars (\$2,0	(000,000		
C. Owner Information					
Last name:	First name:		Compan	y:	
Street address:		I		Unit number:	Lot/con:
Municipality:	Postal code:	Province:	E-m	ail:	
Telephone number:	Fax			Applicant Contact nu	mber:
D. Declaration of Applicant					
				corti	ify that:
(print na	ame)			ceru	ily illat.
By signing this application the Owner agrees that any false information ma					plicant further
agrees that any raise information ma	y result in a revocation of	arry licerice	llial illay	be issued.	
Date	Signature o	f Applicant			
This application may contain persona Privacy Act. The information collecte					
Newmarket to process the application	n, and to determine whet	her to issue a	a licence.	Information will also b	e used for
administration of such licence, and for regulations and by-laws.	or law enforcement purpo	ses to ensure	e complia	nce with all applicable	e statutes,
,					
Office Use Only Date:		Approved b	y:		
Owner's licence: \$				3121.7741.01	



## Limousine Application Form #01 Legislative Services Licensing Division

### Town of Newmarket Drivers Affiliated with Refreshment Vehicle Company

Full Name of Driver:	
For each driver the following info	rmation shall be attached:
☐ Criminal Record check issued	within 30 days of the application
	Office Use Only
Reviewed Bv:	Date



## Limousine Company Application Form #02 Legislative Services Licensing Division

#### **Town of Newmarket Refreshment Vehicles Affiliated with Refreshment Vehicle Company**

For each Refreshment Vehicle affiliated with the company, attach following information for Type 1 (Motor Vehicle), Type 2 (Trailer /Cart) & Type 4 (Food Truck):

☐ Vehicle Ownership	
☐ Safety Standard Certificate iss	sued within 30 days of application
☐ Proof of valid automobile insu	rance in the amount of \$2,000,000
☐ Proof of of general liability insured of Newmarket as an additiona	urance in the amount of \$2,000,000 naming the Town I insured
•	on Medical Officer of Health indicating that the swith all regulations (New only)
	Office Use Only

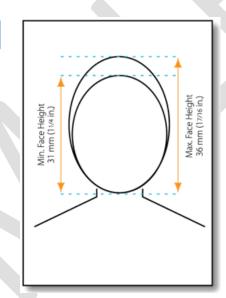
# Refreshment Vehicle Application Form #03 Legislative Services Licensing Division

#### Refreshment Vehicle Driver Identification

**Business Name:** 

Driver's Full Name:

Newmarket Business Licence #:



- Must be provided upon request
- Displayed at all times & visible
- New drivers are required to be registered with the Town