



Development Services Department
 60 Snyder's Road West
 Baden, ON N3A 1A1
 519-634-8444
planning@wilmot.ca
www.wilmot.ca/planning

Application Number: _____

Date Received: _____

**APPLICATION FOR REFRESHMENT
 CART OR REFRESHMENT VEHICLE**

SUBMISSION REQUIREMENTS

- Region of Waterloo Public Health approval
- Township Fire Department approval
- License Fee (see <https://www.wilmot.ca/en/doing-business/Planning-Fees.aspx>)

1. LICENSE REQUEST

- Refreshment Cart Refreshment Vehicle
- Annual
- Daily / One Day

2. APPLICANT INFORMATION

Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone number: _____

Email Address: _____

Preferred method of communication: Regular mail Email

3. PROPERTY OWNER (if applicable and different than applicant)

Name(s): _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone number: _____

Email Address: _____

Preferred method of communication: Regular mail Email

4. PROPERTY DESCRIPTION (if applicable)

Lot: _____ Concession: _____ Block: _____

Registered Plan: _____ Lot(s): _____ Block(s): _____

Reference Plan: _____ Lot(s): _____ Block(s): _____

Street Address: _____

5. BRIEF BUT COMPLETE DESCRIPTION OF PROPOSED ACTIVITY

Date(s) of Operation: _____

6. AUTHORIZATION OF OWNER (If applicable)

I/We, _____,

owner of the land that is the subject of this application for a refreshment vehicle or cart license,

hereby authorize _____

to make this application on my/our behalf.

Signature of Owner

Date

Signature of Owner

Date

7. CERTIFICATION OF APPLICANT

I, _____, hereby certify that the

information contained in this application as well as any accompanying documents is true.

Signature of Applicant

Date