

Town of Midland

575 Dominion Avenue Midland, Ontario L4R 1R2 www.midland.ca service@midland.ca +705-526-4275

Food Vendor Licence Application

Signed application must include the following:

- Applicable application fee (not refunded if application is denied)
- Proof of approval from the Simcoe Muskoka District Health Unit
- · Proof of propane/gas inspection by licensed installer
- Proof of permission to operate on private property (if the applicant is not the owner of the property)
- Permission of MLEO (if located on municipal property)
- Proof of \$2 million comprehensive general liability insurance naming the Town as an additional insured (if located on municipal property)
- If the event is to occur within the downtown, Downtown Midland BIA approval is required.
- Site Diagram/Sketch

Applicant Identification:

Zoning Clearance

Please note that submission of this form does not guarantee approval. Your application will not be processed until all applicable information has been received.

Registered Name of Business: Name of Refreshment Vehicle Operator(s): Business Address (including postal code): Telephone Number: Home Contact Person/Position:

<u>Licence Fee</u>: Please see the Town's Fees and Charges By-law for current application fees (All fees are non-refundable)

Please note: Events held on behalf of non-profit charitable organizations and non-profit non- charitable organizations are exempt from paying a licence fee if the intent of the event is to raise funds for charitable purposes. In this case, approval must be granted by the Municipal Law Enforcement Officer.

If applicable, name of non-profit charitable organization or non-profit non-charitable organization for which proceeds are being raised:

Have	you received a previous	Refreshment Vehicle	license from	the Town	of Midland?
Yes [.]	Licence Number:			No.	

Annual Licence:

you are applying for an annual licence, is your business located within the Town of Midland r do you operate from a designated location within the Town of Midland? Yes: No:
Please provide the municipal address of the location where the vehicle will be located:
event Licence:
you are applying for an event licence, please provide the following:
Pate of Event: Hours of Operation:
ocation of Event:
(Name of Property/Owner)
(Address/Property Description)
Office Use Only:
● Receipt Number: Not applicable □
● Simcoe Muskoka District Health Unit approval Yes □ No □
$ullet$ Propane/gas inspection by licensed installer Yes \square No \square
● Zoning Clearance: Yes □ Initials: No □
$ullet$ Permission to operate on private property: Yes \square No \square Not applicable \square
Certificate of Insurance: Yes □ No □ Not applicable □
Site Diagram/Sketch: Yes □ No □
Permission of MLEO (Municipal Property): Yes □ No □ Not applicable □
Approval of the Downtown Midland BIA: Yes □ No □ Not applicable □
MLEO approval Yes □ Initials: No □ Not applicable □
 Fire Inspection and checklist (includes NFPA 96 Compliance for deep fryers): Yes □ Initial:No □ Not applicable □ Licence Number issued:
Signature of Applicant I,, do confirm that the information provided on this Refreshment Vehicle License Application is to the best of my knowledge and ability, complete and correct. I hereby confirm that I have read By-law 2010-28 being the by-law to licence and regulate Auctioneers, Hawkers and Peddlers, Farmers' Markets and Refreshment Vehicles within the Town of Midland and I agree to comply with the provisions therein. I confirm that upon approval, I hereby indemnify and save harmless the Town of Midland from all claims, actions, costs (including legal
costs), demands and liabilities with respect to any personal injury, death or property damage done or sustained by anyone with respect to the said land of the Town of Midland. day of, 20 Signature of Applicant



Date:

Midland Fire Department Fire Prevention Division 550 Bayshore Drive Midland, ON L4R 5E7

Applicant:

Outdoor Food Service Unit/Refreshment Venue/Vehicle Checklist

Address:	Phone:					
Contact:	Date of Event:					
Make/Model Propar	ne	Nat Gas	Yes	No	N/A	
•						
1. Proof of inspection by qualified gas technic	roof of inspection by qualified gas technician within previous 12					
months. (provided on TSSA MFSE checklist as required)						
	•	•				
2. Minimum 3A10BC rated portable fire exting	Minimum 3A10BC rated portable fire extinguisher					
3. Portable fire extinguisher maintained as per Ontario Fire Code						
g						
4. Trained in proper use of portable fire exting	4. Trained in proper use of portable fire extinguisher					
	B 4.3					
5. Aware that unit must not be left unattende	ed unless shu	ıt down				
6. Photograph of unit on file						
or inotograph of anic on the						
7. Aware of safe/proper storage of fuel cylind	ers full or er	mntv				
7. 7. Trudic of Sarcy proper storage of fact cymia	ers run or er					
8. Drawing/sketch of site plan and set-up						
o. Drawing/sketch of site plan and set up						
9. Proper clearance to combustibles (1 meter	minimum) a	and no cooking				
•	Proper clearance to combustibles (1 meter minimum) and no cooking under materials that do not meet NFPA 701 Flame Certified Tents &					
Canopies.	r i i airie Cert	illed Tellts &				
canopies.						
10. Protective barriers in place to prevent accid	lental nublic	contact				
10. I Totalive bulliers in place to prevent accid	aciitai pabiit	Contact				
Operator signature		Date				
Operator signatureDate		5410				
Fire Dept. Inspector's signature Date						

Notes:	 	 	