Application for Refreshment Vehicle Operator License

Date Received:	License Number:

A. Refreshment Vehicle Type

☐ Type 1 (Motor Vehicle) ☐ Type 2 (Trailer/Cart) ☐ Type 3 (Muscle Powered Cart) ☐ Type 4 (Food Truck)

B. ☐ New ☐ Renewal

C.. Application Requirements:

The following original documents must be included with this application:

☐ Canadian Citizenship, Landed Immigrant Status, or a Valid Work Permit issued by the Government of Canada **(New only) (Office Note: Photocopy for file)**

☐ Current valid Class "G" Ontario Driver's license **(Type 3 requires only valid photo I.D.) (Office Note: Photocopy for file)**

☐ Current and valid Criminal Record Check issued within 60 days of the application by the Police Service having jurisdiction where the applicant resides

☐ Drivers abstract current within 30 days **(not required for Types 2 & 3)**

☐ Certificate prepared by a duly qualified medical doctor stating the licensee is fit and able to operate a motor vehicle and work with food **(Every 2 years)**

☐ Fee

D. Owner Information

Choose the type of License: ☐ 1 year ☐ 2 year

Last name:	First name:	Company:		
Street address:			Unit number:	Lot/con:
Municipality:	Postal code:	Province:	E-mail:	
Telephone number: ( )	Fax ( )		Cell number ( )	

E. Declaration of Applicant

I_____certify that:
(print name)

By signing this application the Owner/Applicant agrees that all information provided is true. The Owner/Applicant further agrees that any false information may result in a revocation of any license that may be issued.

_____ _____
Date Signature of Applicant

This application may contain personal information as defined under *the Municipal Freedom of Information and Protection of Privacy Act*. The information collected is required pursuant to the terms of the *Municipal Act* and will be used by the Town of Newmarket to process the application, and to determine whether to issue a license. Information will also be used for administration of such license, and for law enforcement purposes to ensure compliance with all applicable statutes, regulations and by-laws.

OFFICE USE ONLY	
Date:	Approved by:
Operator License Fee: $	Account Number: 13121.7741.01
Lost Operator ID Fee: $	Account Number: 13121.7741.02

Legislative Services
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