



Application for Mobile Food Vendor License

Applicant Name (Last) Please Print	(First)Please Print	(Middle)
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Address

City/ State	Zip Code	Phone Number
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Legal Description or Address of Desired Location- **Seasonal Vendors Only**

Brief Description of Business to be Conducted and Items to Be Sold

Description and Content of Any Signs to be Used

Dates Business will be Conducted	From Date	To Date	Hours of Operation
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License Number and Vehicle Description to be Used

Oklahoma Tax Commission Sales Tax Letter Document Attached
 Land Owner Authorization Letter Document Attached

Employer Name (if not self-employed)	Phone Number
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Employer Address	City/State	Zip Code
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Previous Location

Signature	Date
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