

This form is to be used to apply for approval to participate in the Maitland City Council Street Eats Program. The application will be assessed using the selection process and guidelines outlined in the Operating Guidelines and in line with the Local Approvals Mobile Food in Public Places Policy. Please read the Guidelines and Policy before completing your application form.

Applicants must complete and submit a Street Eats Application form with all supporting documentation prior to final approval.

# **STEP 1-TELL US ABOUT YOUR BUSINESS**

SECTION 1.1 - APPLICANT DETAILS	
Name:	Postal Address:
Trading Name:	
ABN/CAN:	Email address:
Registered Address:	Contact phone number:
SECTION 1.2 - VEHICLE DETAILS	
Vehicle Make:	Vehicle owners name:
Vehicle Model:	Vehicle type: ☐ Food Truck ☐ Food Van
Registration number:	Vehicle Size (length, width and height):
Address where vehicle is garaged:	
SECTION 1.3 - FOOD BUSINESS DETAILS	
Please, tell us a little bit about your business, remember to (Competitive local business, environmental and sust experience and quality product).	

Images of set up an	<b>d vehicle</b> – Please attach	
Describe your menu s	style and some of the items you p	olan to include in your menu (or alternatively attach a menu).
STEP 2 - SELE	CT YOUR OPERATIN	IG PREFERENCES
	ed approval for a 12 month peric ase indicate your selected appro	od from date of approval. See guidelines for a detailed description val type.
☐ Street Vending	☐ Cluster Group Vending	☐ Street Vending and Cluster Group Vending
$\square$ Council Managed	Sportsground	
OPTION 1 - STREET	VENDING:	

If you selected the Street Vending approval type, please write down your preferred site using the Approved Location List. Please note some sites have restricted operating times and locations as per the Approved Location List.

REF#	SITENAME	PROPOSED OPERATING TIMES AND DAYS
Eg.2	City Library	Thursday nights - 5.30pm - 9.00pm Sunday nights - 5.30pm - 9.00pm

## **OPTION 2 - CLUSTER GROUP VENDING:**

Once approved, Council will contact you regarding your availability for upcoming Street Eats Get Togethers.

## **OPTION 3 - COUNCIL MANAGED SPORTSGROUNDS:**

Subject to agreement (in writing) by the club, group or individual licensed to use a facility. Mobile food vending vehicles may only operate during the time approved in the user's hire agreement with Maitland City Council.

# STEP 3 - ATTACH YOUR SUPPORTING DOCUMENTS

Please tick applicable boxes below to confirm that you have provided copies of the documents requested. Please lodge copies with the completed application form.

NOTE: Failure to supply the required documents will result in your application being returned.

	ш			v	IS	т
L	п	•	L	N	I)	п

Ш	RMS Vehicle Registration (as proof of registration).
	Certificate of Currency Broadform Public and Products Liability insurance to the sum of \$20,000,000, noting Council as an interested party.
	Certificate of Currency of Third Party Property Damage Insurance to the value of \$20,000,000.
	Current Maitland City Council Approval to Operate a Temporary Food Business or mobile food vehicle (based within Maitland LGA) or a Notification of Temporary Food Business or Mobile Food Vehicle (based outside the Maitland LGA) or evidence that this is underway.
	Images of set up and vehicle.
	Example menu (if not described in form).
	Completed application form.
_	

Council reserves the right to revoke an operators permit at any time if it is deemed the operator is not complying with any elements of the Operating Guidelines.

#### **PAYMENT**

Payment is required upon Council's approval to participate in the program. You will receive a request for payment following approval.

	APPROVAL TYPE	ANNUAL FEE
1	Street Vending	\$330 inc GST
2	Cluster Group Vending	\$450 inc GST
3	Street Vending and Cluster Group Vending	\$680 inc GST
4 Council Managed Sportsground		Ad hoc basis

# **STEP 4 - APPLICANT DECLARATION**

I declare that all information provided is true and correct. I agree to comply with the conditions as defined in the operating guidelines.

,			
APPLICANT	NAME:	 	
APPLICANT	SIGNATURE:	 	
DATE.			

## **CONTACT DETAILS**

For any enquiries please contact:

Place Activation Team Place.Activation@maitland.nsw.gov.au p 02 4939 1065