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CITY OF HARLEM, GEORGIA

MOBILE FOOD VENDOR /PUSH-CART/ICE CREAM TRUCK LICENSE APPLICATION

Chapter 8, Division 4 Mobile Food Vendors of the City of Harlem Code of Ordinances establishes an application process for mobile food vendors and push-card operators in order to promote health, safety and the general welfare of the Citizens of Harlem. The license application will permit safe and convenient use of the public rights-of-way within the Harlem City Limits.

APPLICATION INFORMATION

Event Affiliation

Name of City of Harlem Sponsored Event / Sanctioned Special Event: _____
or
Private Property Location: _____

Type of Vending Unit (check one)

Street Vending Unit (vehicle): _____ Sidewalk Vending Unit (push-cart): _____
Ice Cream Truck: _____

Mobile Food Vendor Information

Business Name: _____
Vendor Name: _____
Operator Street Address: _____
Operator Mailing Address: _____
Operator Telephone Number: _____
Business Email Address: _____
Business Web Site Address: _____
Georgia Department of Revenue Sales Tax ID Number: _____

Vending Unit Information

Make: _____ Model: _____
Year: _____ License Plate State: _____ License Plate Number: _____
VIN Number: _____

Will the Unit have capacity for all garbage, grease and other effluent storage? ____ Yes ____ No
Please describe the restroom accommodations for Vending Unit Operators: _____

Vending Unit Owner Contact Information

Owner's Name: _____

Physical Address: _____

Mailing Address: _____

Telephone Number: _____

Email Address: _____

List of Vending Unit Operating Locations and Times
(Restrictions Described in 8-134 (c)(7))

Operating Hours: 7:00AM-9:00AM and/or 10:30AM – 2:30 PM

Operating Location	Operating Parcel	Operating Times

Describe the Parking Arrangements and any Potential Traffic Problems:

Vending Unit Route Map showing Times is Attached: _____ (Vendor Signature)

Attachments

Attachment 1: Copy of Mobile Food Service Operation Permit from the Columbia County Health Department. ____ Applicant Initials

Attachment 2: Copy of Georgia Department of Agriculture Food Safety Division License for Food Sales, Mobile Vehicle Sales, and Wholesale Fish Sales. ____ Applicant Initials

Attachment 3: Copy of Serve Safe Certificate. ____ Applicant initials

Attachment 4: Enlarged Color Copy Picture Identification: ____ Applicant initials

Attachment 5: Copy of Current Occupational Tax Certificate. ____ Applicant initials

Attachment 6: Executed O.C.G.A. 50-36-1 (e)(2) Affidavit is attached. ____ Applicant initials

Attachment 7: Executed Private Employer Affidavit Pursuant to O.C.G.A. 36-60(d) is attached.

_____ Applicant initials

Attachment 8: Permission from each Operating Location Parcel Owners are attached.

_____ Applicant initials

Attachment 9: Photographs showing all four (4) sides of the Vending Unit. _____ Applicant initials

Permit Fee Schedule:

Per Harlem Code of Ordinances 8-138 and the Adopting Resolution, there is established a \$30.00 Annual Mobile Food Vendor Fee. This fee is due at the submission of this application.

Hold Harmless Agreement:

By signing this application, the applicant and affiliated company shall indemnify, hold harmless and defend the City of Harlem and all its officers, employees, servants and agents against any and all liability claims, costs of whatever kind and nature, for any injury to or death of any person or persons and for loss and damage to any property (State, County, City, or other) occurring in connection with or in any way related to or arising out of operations associated with this license.

Certification

I hereby affirm that I am the applicant for a City of Harlem, Georgia Mobile Food Vendor/Push-cart/Ice Cream Truck License and that I shall abide by all requirements listed in this application and Chapter 116 of the City of Harlem Code of Ordinances as certified by the information provided in this application.

Signature

Date

Printed Name

Title

Notary Signature

Notary Date

City of Harlem Use:

Health Dept. License ID:

Department of Ag ID: _____

Date Received: _____

Payment Info: _____

Amount Paid: _____

Mobile Food Permit Number: _____

License Delivery Date: _____

License Delivery Method: _____

Locations Entered into GIS: _____

Location Restriction Reviewed: _____

Revocation Date: _____

Suspension Details: _____

Name of City of Harlem Sponsored Event / Sanctioned Special Event: _____

Application Determined not to be Required per 116-03 LICENSE REQUIRED. _____ Official

O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a loan, grant, tax credit and/or other public benefit, as referenced in O.C.G.A. § 50-36-1, from the Georgia Department of Community Affairs the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) _____ I am a United States citizen.
- 2) _____ I am a legal permanent resident of the United States.
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

_____.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed this the ____ day of _____, 2023 in _____ (city), _____ (state).

_____ *Signature of Applicant

_____ Printed Name of Applicant

SUBSCRIBED AND SWORN

BEFORE ME ON THIS THE ____ DAY OF

_____, 202__

_____ NOTARY PUBLIC

My Commission Expires: _____

*This Affidavit must be signed by the same person who executes the Application Certification Form Letter

Private Employer Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. § 36-60-6(d):

Section 1. Please check only one:

(A) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed more than ten (10) employees (1).

*** If you select Section 1(A), please fill out Section 2 and then execute below.

(B) _____ On January 1st of the below-signed year, the individual, firm, or corporation employed ten (10) or fewer employees.

*** If you select Section 1(B), please skip Section 2 and execute below.

Section 2. The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

_____ Name of Private Employer
_____ Federal Work Authorization User Identification Number
_____ Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ___, 202__ in _____ (city), _____ (state).

_____ Signature of Authorized Officer or Agent

_____ Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 202__.

_____ NOTARY PUBLIC

My Commission Expires: _____

- (1) To determine the number of employees for purposes of this affidavit, a business must count its total number of employees company-wide, regardless of the city, state, or country in which they are based, working at least 35 hours a week.

