## **City of Vilonia Mobile Food/Business Permit Application**

Submission of this form does not guarantee approval of site location. A false statement or misrepresentation may make the permit null and void. All site approvals expire on December 31st of each calendar year or if revoked.

Business:			
<b>Applicant:</b> Business Owner Name	2:		
Phone:			
Mailing Address:			
City:	State:	ZIP:	
Proposed Location Ac	ldress:		
Zoning Area – Please of Town Center O or Hig	check one of the following hway Mixed Use O		
being issued	rwork must be complete oval from the Vilonia Plan Privilege Tax		o this permit
Applicant Signature:		Date:	
	ed list for Rules and Regula that you have read		oile/Food Business
	FOR OFFIC	CE USE ONLY	
APPROVED:	DENIED:	DATE:	
PLANNING COMM	MISSION APPROVAL:	PRIVILEGE TAX:	