



THE CORPORATION OF THE TOWNSHIP OF WILMOT
DEVELOPMENT SERVICES DEPARTMENT
60 Snyder's Road West
Baden, ON N3A 1A1
Phone: (519) 634-8444
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www.wilmot.ca

**APPLICATION FOR REFRESHMENT CART
OR REFRESHMENT VEHICLE LICENSE**

1. Request For:

Refreshment Cart ☐
Refreshment Vehicle ☐

2. Applicant: _____

Address: _____

Telephone Number: _____

3. Property Owner (if applicable): _____

Address: _____

Telephone Number: _____

4. Property Description (if applicable):

Lot: _____ Concession: _____ Block: _____

Registered Plan: _____ Lot(s): _____ Block(s): _____

Reference Plan: _____ Lot(s): _____ Block(s): _____

Street Address: _____

Roll Number: _____

5. Give brief but complete description of proposed activity:

Date(s) of Operation: _____

6. Attach the following:

- (a) Region of Waterloo Public Health approval ☐
- (b) Police Records Report ☐
- (c) Township Fire Department approval ☐
- (d) Sketch of subject property showing (if applicable): ☐
 - i) lot boundaries and dimensions
 - ii) location of existing buildings and proposed operation relative to property lines
- (e) License Fee
 - i) Refreshment Vehicles
 - Annual \$750.00 ☐
 - Daily / One Day \$50.00 ☐
 - ii) Refreshment Carts
 - Annual \$500.00 ☐
 - Daily / One Day \$25.00 ☐

8. Authorization of Owner (if applicable):

I, _____, am the owner of the land that is the subject of this application for a specific location daily sales license and I authorize _____ to make this application on my behalf.

Owner:_____ Date:_____

9. Certification of Applicant:

I, _____, hereby certify that the information contained in this application as well as any accompanying documents is true.

Applicant:_____ Date:_____

OFFICE USE ONLY

Received By:_____ Date:_____

(a) Application Number:_____

(b) Applicable Official Plan Category:_____

(c) Applicable Zoning:_____

(d) Does existing use conform to all zoning regulations:

Yes ☐ No ☐

If no, explain:_____

(e) Will proposed use conform to all zoning and building regulations:

Yes ☐ No ☐

If no, explain:_____

Approval recommended: Yes ☐ No ☐

Planner / Economic Development Officer:_____

Date:_____