



City of Mora  
101 Lake Street South  
Mora, MN 55051

Telephone: 320-364.1173  
E-mail: n.segelstrom@cityofmora.com

## Mobile Food Unit Application

Fees: ☐ Annual License \$75

Licensee Information					
Type of Applicant	Individual	Corporation	Applicant Full Name <i>(person completing the application)</i>		
	Partnership	Association			
Legal Name of Licensee <i>(individual, business, partnership, LLC, Corporation)</i>			DBA or Trade Name		
Licensee Address		City	State	Zip Code	
Is this your permanent address? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please provide permanent address.					
Primary Phone		Alternate Phone		Email	
Minnesota Business Tax ID Number <i>(Per Minnesota Statutes 270C.72)</i>		Federal Tax ID Number		Applicant's Social Security Number <i>*(must be provided if the MN and Federal ID numbers are not provided)</i>	
Vehicle Information					
License Plate #	State	Make	Model	Year	Color
Certificate of Insurance					
<p><input type="checkbox"/> A Copy of the Certificate of Insurance must be attached to this application.</p> <p>The city requires <u>all</u> applicants to provide a certificate of insurance that has been issued to the applicant by an insurance company authorized to do business in the State of Minnesota verifying the applicant is insured against claims arising out of all operations of such applicant under this chapter for the sum of at least one million dollars (\$1,000,000.00) against liability for bodily injuries and for at least one million dollars (\$1,000,000.00) against liability for damage or destruction of property.</p> <p>Certificate of insurance must contain a provision requiring at least thirty (30) days' advanced written notice to the city, or ten (10) days' written notice for non-payment of premium notification be sent to the city should the policy be cancelled before its stated expiration date.</p>					
State License					
Mobile food units shall hold a valid license from the State of Minnesota Department of Health or Department of Agriculture. A copy of the state license must be attached to this permit application.					
Previous Licenses					
<p>Please list the last three (3) municipalities you held a license for operating a Mobile Food Unit. Include city, state, and dates.</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>					



### Submittal Checklist

- ☐ Completed application.
- ☐ Application Fees made payable to "City of Mora".
- ☐ Completed and signed Certificate of Compliance Minnesota Workers' Compensation Law form.
- ☐ Completed and signed Background Investigation Consent Release.
- ☐ Copy of driver's license or valid government issued photo identification.
- ☐ Copy of proof of Minnesota Department of Health or Minnesota Department of Agriculture License.
- ☐ Certificate of Insurance.

Please note: License applications may take up to 30 days for approval so please allow ample time between the application and your first event.

### Applicant Signature

I certify that I have read the above questions and the answers are true and correct to the best of my knowledge.

\_\_\_\_\_ shall perform its activities in full conformance with applicable federal, state and local

(Licensee Name)

laws, and shall be responsible for, and shall indemnify, defend and hold harmless the City of Mora and all of the City's officers, employees and agents from and against all claims, suits, liability, damages and losses, specifically including, but not limited to those for loss of use of property, for damage to any property, real or personal, for injury to or death of any person, and for all other liabilities whatsoever including related expenses and actual attorney fees in any way sustained by reason of the activities authorized by this license, permit or agreement in connection with the actions of

\_\_\_\_\_, its employees, agents or officers within the City of Mora.

(Licensee Name)

The foregoing shall not be construed to be an agreement to indemnify the City of Mora, its officers, agents or employees against liability for claims, suits, damages and losses to the extent that such claims, suits, damages and losses were caused by or resulting from the gross negligence or willful misconduct of the City of Mora, its officers, employees or agents. This permit, license or agreement shall be construed in accordance with the laws of the State of Minnesota.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### OFFICE USE ONLY

Date Filed: \_\_\_\_\_ Fees Paid: \_\_\_\_\_ Receipt number: \_\_\_\_\_

Background check: \_\_\_\_\_ City Official: \_\_\_\_\_ Date: \_\_\_\_\_

☐ Approve, \_\_\_\_\_

☐ Deny, \_\_\_\_\_

License Number: \_\_\_\_\_ Comments: \_\_\_\_\_





**Background Investigation Consent Release  
Information to be Used for Business License  
Processing**

As a license applicant, I hereby authorize the Kanabec County Sheriff's Office to conduct a criminal history background investigation to include adult and juvenile records and also a search of my driver's license record, as well as any other searches deemed necessary in the determination of whether my business license application is to be approved. The results of such investigation shall be made public pursuant to appropriate City Council approval or denial of the license application. I understand that I am under no legal obligation to consent to such investigation, but that if I refuse to so consent, my application cannot be processed.

I understand that data I have provided may be shared in whole, or in part, with other agencies within the criminal justice system, by other private and public entities, by other persons for the purpose of conducting a background investigation, and by all individuals in the city who need to know this information.

I release the City of Mora, the Kanabec County Sheriff's Office, and any of its agents or employees, from any and all liability for its receipt and use of information and records received pursuant to this consent. I further acknowledge that I have carefully read this release, fully understand its terms and legal significance, and execute it voluntarily.

Business Name: \_\_\_\_\_ Type of License Applied for: **Mobile Food Unit**

Applicant: \_\_\_\_\_  
(First Name) (Full Middle Name) (Last Name)

List All Aliases/Previous Last Names: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Driver's License/State ID#: \_\_\_\_\_ State issued: \_\_\_\_\_  
(A copy of your driver's license/state ID must be attached (front and back).)

Residential Address: \_\_\_\_\_

List Complete Addresses of Any Prior Residence(s) in the Last 5 Years: *(attach additional sheets if necessary)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Physical Appearance: Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Ht: \_\_\_\_\_ Wgt: \_\_\_\_\_ Eyes \_\_\_\_\_ Hair: \_\_\_\_\_

Have you ever been convicted of a felony, gross misdemeanor, or misdemeanor? ☐ Yes ☐ No

If yes, state jurisdiction, type of violation, and disposition: \_\_\_\_\_  
\_\_\_\_\_

These statements are true, correct, and are made with the knowledge that this information may be made public. False disclosures are subject to perjury proceedings and forfeiture of the license application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only**

Background Investigation: ☐ Approved ☐ Denied

Comments:

Police Chief/designee: \_\_\_\_\_ Date: \_\_\_\_\_





## Tennessee Warning Application for Business License

In connection with your request for a license the City of Mora has asked that you provide information about yourself which is classified as either *private* or *confidential* by the Minnesota Government Data Practices Act (M.S.A. 13.04). Accordingly, the city is required to inform you of the following:

1. The private or confidential information requested includes, but may not necessarily be limited to, the following: *Your social security number or Minnesota business identification number.*
2. The purpose and intended use of the information requested is: *To comply with Minnesota Statutes, Section 270.72.*
3. You are required to supply the requested information.
4. The known consequences of supplying the requested information is as follows: *Loss or denial of the requested license if you owe the State of Minnesota delinquent taxes, penalties or interest.*
5. The known consequences of refusing to supply the requested information is: *Your request for a license cannot be processed.*
6. The following persons and entities are authorized by law to receive the information if provided: *State of Minnesota - Department of Revenue and other government agencies as provided by law.*

*By signing below, I acknowledge that I have read and understand the contents of this notice.*

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Signature of Applicant

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Date

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Printed Name of Applicant

### Notice to all license applicants - proposed ordinances

The City of Mora distributes general city information and notices electronically through an electronic notification system. As an applicant for a new business license or for a renewal of an existing business license, you can sign up to receive notices through the city's electronic notification system at the city's website at [www.ci.mora.mn.us](http://www.ci.mora.mn.us). This would include getting notifications of any proposed ordinances at least ten days before the city council conducts a final vote on the proposed ordinance.





# Certificate of Compliance

## Minnesota Workers' Compensation Law

This form must be completed by the business license applicant.

### Print in ink or type

Minnesota Statutes § 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minn. Stat. chapter 176. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

A valid workers' compensation policy must be kept in effect at all times by employers as required by law.

License or certificate number (if applicable)	Business telephone number	Alternate telephone number	
Business name (Provide the legal name of the business entity. If the business is a sole proprietor or partnership, provide the owner's name(s), for example John Doe, or John Doe and Jane Doe.)			
DBA ("doing business as" or "also known as" an assumed name), if applicable			
Business address (must be physical street address, no P.O. boxes)	City	State	ZIP code
County	Email address		

### You must complete number 1 or 2 below.

**Note:** You must resubmit this form to the authority issuing your license if any of the information you have provided changes.

1. ☐ I have a workers' compensation insurance policy.

Insurance company name (not the insurance agent)

Policy number	Effective date	Expiration date
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☐ I am self-insured for workers' compensation. (Attach a copy of the authorization to self-insure from the Minnesota Department of Commerce; see [www.mn.gov/commerce/industries/insurance/licensing/self-insurance](http://www.mn.gov/commerce/industries/insurance/licensing/self-insurance).)

2. I am not required to have workers' compensation insurance because:

- ☐ I only use independent contractors and do not have employees. (See Minn. Stat. § 176.043 for trucking and messenger courier industries; Minn. Stat. § 181.723, subd. 4, for building construction; and Minnesota Rules chapter 5224 for other industries.)
- ☐ I do not use independent contractors and have no employees. (See Minn. Stat. § 176.011, subd. 9, for the definition of an employee.)
- ☐ I use independent contractors and I have employees who are not required to be covered by the workers' compensation law. (Explain below.)
- ☐ I only have employees who are not required to be covered by the workers' compensation law. (Explain below.) (See Minn. Stat. § 176.041 for a list of excluded employees.)

Explain why your employees are not required to be covered

I certify the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify I am authorized to sign on behalf of the business.

### Print name

Applicant signature (required)	Title	Date
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The City of Mora is an Equal Opportunity Provider/Employer. For TDD, call 711.





City of Mora  
101 Lake Street South  
Mora, MN 55051

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## Mobile Food Unit Reservation

Vendor/Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Certificate of Insurance

A Certificate of Insurance must be on file with the city listing the city as an additional insured on the certificate and the umbrella/excess insurance if the applicant intends to operate its mobile food unit on public property, including right-of-way. A certificate must be attached to this reservation form if a current certificate is not on file with the city.

Please indicate below days/times you would like to reserve and the corresponding location, Railroad Avenue or Vacant Lot.

Requested Date	Hours	Location	OFFICE USE ONLY
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use
		<input type="checkbox"/> Railroad Ave <input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Available <input type="checkbox"/> In Use

Reservations for parking spaces are taken on a first come - first serve basis and cannot be made more than three months in advance. All dates are subject to availability and the city reserves the right to change a reservation with advance vendor notification.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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### **FOR OFFICE USE ONLY:**

Date request received: \_\_\_\_\_ Vendor has approved city permit? ☐ Yes ☐ No

Certificate of Insurance listing city as additional insured on file? ☐ Yes ☐ No

Reservations added to calendar? ☐ Yes ☐ No

Vendor notified: \_\_\_\_\_

Forwarded to A&R Coordinator: \_\_\_\_\_

Comment: \_\_\_\_\_

**Corner Vacant Lot**, at the corner of Forest Avenue and Union Street. (PID 22.03435.00)  
Permitted MFUs may park anywhere inside the property lines.



**Railroad Avenue location**, permitted MFUs may park anywhere inside the allotted parking space



## § 113.10 MOBILE FOOD UNITS.

(A) *State license.* Mobile food units shall hold a valid license from the State of Minnesota Department of Health or Department of Agriculture. Any conditions of the State Health Department shall be incorporated into the license issued under this section, in addition to any other conditions by the city.

(B) *Insurance.*

(1) A certificate of insurance that has been issued to the applicant by an insurance company authorized to do business in the State of Minnesota verifying the applicant is insured against claims arising out of all operations of such applicant under this chapter for the sum of at least one million dollars (\$1,000,000.00) against liability for bodily injuries and for at least one million dollars (\$1,000,000.00) against liability for damage or destruction of property. The city shall be endorsed as an additional insured on the certificate of insurance on public property including right-of-way.

(2) Certificate of insurance must contain a provision requiring at least thirty (30) days' advanced written notice to the city, or ten (10) days' written notice for non-payment of premium notification be sent to the city should the policy be cancelled before its stated expiration date.

(B) *Hold harmless.* A mobile food unit operating on city property, including public right-of-way, must submit a signed statement that the licensee shall hold harmless the city and its officers and employees, and shall defend and indemnify the city and its officers and employees for any claims for damage to property or injury to persons which may be occasioned by any activity carried on under the terms of the license.

(D) *Duration of sales.* A license shall be valid for one (1) year but the mobile food unit cannot operate in, or in front of, the same location for more than twenty-one (21) days each year within the city.

(E) *Overnight storage.* No overnight storage of a mobile food unit shall be permitted on city property, including public right-of-way, unless approved by City Council.

(F) *Signs.* No signage shall violate the provisions of this Code relating to size and number of business signs.

(G) *Noise.* No shouting, blowing a horn, ringing a bell, or use of any sound devices upon any of the streets, alleys, parks, or other public places of the city or upon any private premises in the city. Ice cream trucks traveling through a residential district may have outdoor music or noise-making devices to announce their presence.

(H) *Parking.* Mobile food units must be located on a paved surface. A mobile food unit may not operate in a traffic lane, on a sidewalk, or in any location which causes an obstruction of traffic, such as queuing of patrons or advancement of vehicles. A mobile food unit may operate on eligible public streets and occupy no more than two (2) parking spaces. No parking or sales shall take place within sixty (60) feet of an intersection of two (2) or more streets or within thirty (30) feet of a driveway that enters a public street.

(I) *Hours.* Hours of operation shall be allowed from 8:00 a.m. to midnight, except in a residential district in which sales shall be allowed from 8:00 a.m. to 10:00 p.m.

(J) *Waste disposal.* Mobile food units shall provide waste disposal and clean up all litter and garbage generated by the mobile food unit before moving from the location.

(K) *Self-containment.* Mobile food units shall not connect to public utilities. Any generators must be self-contained.

(L) *Inspections.* Mobile food units shall comply with all applicable fire codes and may be inspected by a city fire official prior to operation.

(M) *Locations.*

(1) Mobile food units shall be allowed in public right-of-way only in zoning districts where retail sales are allowed as permitted uses under the city's zoning code. Except that mobile units may be located on privately owned property in the commercial and industrial zoning districts of the city with written property owner permission and residential lots as exempted per division (R)(5) below.

(2) In the B-I district only one (1) mobile food unit shall be permitted on public property located at the designated, signed parking area along Railroad Avenue. In addition to Railroad Avenue, two (2) mobile food units shall be permitted on public property located at PID 22.03435.00.

(3) Reservations are not permitted when there is a special event held at these locations unless authorized by City Council. City Council may further authorize mobile food units in the B-I district for city-sanctioned activities. Applications for the B-I district will only be accepted up to three (3) months in advance and are on a first come first serve basis with fee payment and a completed application.

(N) *City parks.* Mobile food units are not allowed in city parks unless they obtain written permission of the City Administrator.

(O) *Seating.* Mobile food units may not provide external seating unless located in an industrial zoning district.

(P) *Ice cream trucks.* Ice cream trucks are allowed to operate within the public right-of-way in residential districts.

(Q) *Prohibitions.* Mobile food units are prohibited from vending activities within five hundred (500) feet of an event for

which the city has issued a special event permit, unless they are specifically authorized by the event organizer to participate in the event.

(R) *Exemptions.* The following business activities shall be exempt from the requirements of this section. The City Administrator shall determine if a business activity falls within these exemptions, subject to appeal to the City Council.

- (1) Garage sales, public auctions, rummage sales, and craft sales.
- (2) Establishing a regular customer delivery route for the delivery of perishable food and dairy products such as baked goods, milk, and groceries.
- (3) Selling goods or admissions to events by K-12 students where the proceeds of such sales benefit a program or activity in which the student is involved.
- (4) Mobile food units listed as part of a special event permit issued by the city. The terms of the special event permit shall apply. City-sanctioned events are exempt.
- (5) Mobile food units contracted by residential property owners for private parties where food is not sold to guests or any other members of the public. This exclusion does not include institutional uses defined in the city zoning code, § 150.503(B), in the residential zoning district where mobile food units are contracted to provide food for a public event.
- (6) Mobile food units as part of a school sanctioned event on school property.
- (7) Mobile food units located on Kanabec County Fairgrounds property.

(Ord. 459, passed 5-21-2019)