MOBILE FOOD VEHICLE INSTRUCTIONS

REQUIREMENTS

MOBILE FOOD VEHICLE ("MFV")
A commercially manufactured, self-contained, motorized mobile food unit in which ready-to-eat food is cooked, wrapped, packaged, processed or portioned for service, sale or distribution.

1. **Motor Vehicle Registration** from NYS Motor Vehicle Department
2. **Valid Motor Driver’s License** of each vehicle operator from NYS Motor Vehicle Department
3. **Criminal background check** of the applicant and each corporate officer.
4. **Erie County Health Permit**
5. **Insurances**: Coverage of not less than one million dollars ($1,000,000) per occurrence. All insurance coverage must contain proof of a thirty (30) day cancellation clause with the certificate holder as City of Buffalo and Office of Licenses, 301 City Hall, Buffalo, NY 14202.
   a) Public liability
   b) Food products liability
   c) Property insurance
   d) Worker’s Compensation Insurance or a Exemption Certificate when there are no employees.
6. Provide a **PHOTO** of food truck
7. **FEE**: $800

After you application is accepted, a fire inspection approval is required. (Office of License processes it.) Common Council approval is also required, which the Office of License will process.

RESTRICTIONS

1. Must operate at least 100 ft from an open licensed food establishment.
2. Must abide by parking/traffic laws.
3. Must carry on the vehicle a ‘measuring wheel’ with a measuring capacity of no less than 500 ft.
4. Vehicle must be equipped with trash receptacles.
5. Must operate 500 ft away from a sanctioned Special Event
6. Not valid in the Special Downtown District.
7. Not valid to operate a mobile food truck on private property (must obtain a Stationary Peddler’s License)
CITY OF BUFFALO - MOBILE FOOD VEHICLE APPLICATION

65 Niagara Sq. City Hall Room 301 Buffalo, NY 14202
Phone (716) 851-4078 Fax (716) 851-4952

Food Truck License expires on April 1.

**Type of Entity:**
- ☐ Sole Proprietor
- ☐ Corporation
- ☐ Partnership
- ☐ Limited Liability Company

**Corporation Name** __________________________________________________________

**Business Name** (dba) _______________________________________________________

**Business Address** (no PO Box) ______________________________________________

**Mailing Address** (if different) _______________________________________________

**NYS Tax ID #** ______________________

**Business Website** ______________________

**E-Mail** ______________________

**Information for applicant and each corporate officer**

**Applicant** (last, first) ______________________

**Home Address:** (PO Box not acceptable) _______________________________________

**Corporate officer** (last, first) ______________________

**Home Address:** (PO Box not acceptable) _______________________________________

**Include the following documentation:**

1. **Motor Vehicle Registration** from NYS MVD
2. **Valid Motor Driver’s License** of each vehicle operator from NYS MVD
3. **Criminal background check** of the applicant and each corporate officer
4. **Erie County Health Permit**
5. **Insurances:**
   - a) **Public Liability**
   - b) **Food Products Liability**
   - c) **Property Insurance**
   
   Coverage of not less than $1,000,000 per occurrence. Insurance coverage must contain proof of a thirty (30) day cancellation clause with the certificate holder as City of Buffalo/Office of Licenses, 301 City Hall, Buffalo, 14202.
6. **Worker’s Compensation Insurance** or, if no employees, an Exemption Certificate at [www.wcb.state.ny.us](http://www.wcb.state.ny.us)
7. **FEE:** $800 (Renewed yearly at $500.)

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**I AM AWARE OF THE FOLLOWING RESTRICTIONS:**

- abide by parking/traffic laws;
- must operate from streets and public property and at least 100 feet from an open licensed food establishment; has a ‘measuring wheel’ with a capacity of no less than 500 feet; vehicle must be equipped with trash receptacles; permanently and prominently affix to the vehicle the issued decal; operate 500 feet away from a sanctioned Special Event; not valid in the special Downtown District. *I am aware of the obligation to provide timely notice of any change in required information.*

As an authorized agent of the entity identified above, I certify the information on this form is true, correct, complete and current to the best of my knowledge and belief.

**Name and signature of applicant and each corporate officer**

**Print Name** ______________________

**Signature** ______________________

**Date** __________

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Subscribed and sworn to before me this ____ day of __________ 20 __

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Commissioner of Deeds in and for the City of Buffalo, New York

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For office use only

**App No** ______________________

**Medallion #** ______________________

**Date issued:** ______________________

Revised: May 2013