

City of Allen Park

15915 SOUTHFIELD ROAD
ALLEN PARK, MICHIGAN 48101-2599
PHONE: 313-928-1400
FAX: 313-382-7946
www.cityofallenpark.org



The following process will be used in the issuance of the Ice Cream Vendor License. The license is good for the calendar year and all licenses expire on December 31st.

Annual Fee

\$200.00

Application

Complete the Application and the Police Approval forms and return them to the Clerk's office.

Proof of Insurance

Please provide a copy of the up to date proof of insurance for each vehicle that is being licensed.

Vehicle Inspection

Once the application forms are complete and proof of insurance provided you will need to contact the Officer Jim Soden, CVSA Instructor of the Allen Park Police Department to schedule a vehicle inspection. Officer Soden can be reached at the department's non-emergency number 313 386 7800. Choose option 7 to speak with an officer.

Once the approved police background and Vehicle Inspection check is completed and returned, the request will be placed on the agenda for the next possible City Council meeting for final approval. At present the first council meeting of the month is used for items requiring council approval.

If you have any questions contact this office at 313 928 1144.

Office of the City Clerk
15915 Southfield Road, Allen Park, MI 48101

APPLICATION FOR ICE CREAM VENDOR PERMIT

Name of Business _____

Address of Business _____

Type of Business _____

Business Telephone Number () _____ Extension if applicable _____

Fax Number () _____ E-MAIL _____

Name of Owner (s) _____ Home Telephone () _____

Home Address _____

Name of Local Supervisor (s) _____

Home Telephone () _____

Home Address _____

In case of Fire or Police emergency, person or persons to be contacted who are in the area:

Name _____ Telephone Number _____

Name _____ Telephone Number _____

APPLICANT'S
SIGNATURE _____

AMOUNT OF FEE **\$ 200.00** DATE PAID _____ STAFF INITIALS _____

RECEIPT NO. _____ TAB # _____ LICENSE NUMBER _____

CITY OF ALLEN PARK

OFFICE OF THE CITY CLERK

15915 SOUTHFIELD ROAD, ALLEN PARK, MI 48101

TO: ALLEN PARK POLICE DEPT

FROM: CITY CLERK'S OFFICE

DATE: _____

The following Entity is applying for an Ice Cream Vendors Permit. Please examine your records and complete the Approval/Disapproval of License portion of this form. Completed forms should be returned to the Clerk's office for further processing.

Name of Business Owner _____
(First) (Full Middle) (Last)

Address, City, State Zip _____

Social Security Number _____ Drivers License # _____

Birth date _____ Name of Other Businesses _____

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APPROVAL/DISAPPROVAL OF BUSINESS LICENSE

The Department of _____ herewith approves/disapproves
the application of: _____

for a Business License with the City of Allen Park

Date of Approval/Disapproval _____

Date Returned to City Clerk _____

Dept. Representative Signature _____