



CHICAGO DEPARTMENT OF Business Affairs and Consumer Protection  
**SPECIAL EVENT PERMIT APPLICATION**

**SPECIAL EVENT FOOD TRUCK SINGLE EVENT LICENSE APPLICATION**

*PLEASE TYPE OR PRINT CLEARLY. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED*

THIS FORM MUST BE SUBMITTED 20 CALENDAR DAYS PRIOR TO THE EVENT

**FEE: \$ 75.00 PER VENDOR. (Upon approval you will be sent a link to pay for the license online).**

**Food trucks that are not fully licensed by the City of Chicago are NOT eligible for the Special Event license.**

*Please type or print clearly. Application will be returned if not completed in its entirety.*

Name of Event \_\_\_\_\_

Address of Event (Range if possible) \_\_\_\_\_

Date(s) of Event \_\_\_\_\_

Hours of Event \_\_\_\_\_

Name of Sponsoring Event/Coordinator \_\_\_\_\_

Phone Number \_\_\_\_\_

Legal Name of Mobile Food Vendor \_\_\_\_\_

Contact \_\_\_\_\_

Department of Business Affairs & Consumer Protection Account Number \_\_\_\_\_

Phone Number \_\_\_\_\_

***If you do not have a Chicago Department of Business Affairs & Consumer Protection account or you do not know your account number, please phone (312) 74-GOBIZ.***

Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip Code \_\_\_\_\_

City of Chicago Mobile Food License # \_\_\_\_\_

City of Chicago Mobile Food License Expiration Date \_\_\_\_\_

Food Truck License Plate Expiration Date \_\_\_\_\_

I acknowledge that I am only preparing/dispensing food directly from a City of Chicago licensed Mobile Food vehicle (no outside booth/tent) in compliance with all license requirements  NO  YES

I acknowledge that I am only selling items from our City of Chicago Department of Health pre-approved menu?  NO  YES

**SIGNATURE** (\*Must be signed by an owner or officer) \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_