



**LAKE HAVASU CITY**  
**DEVELOPMENT SERVICES DEPARTMENT**

◆ BUILDING ◆ CODE ENFORCEMENT ◆ PLANNING AND ZONING ◆

**MOBILE FOOD VENDOR BUSINESS LICENSE**  
**Supplemental Application**

Please provide the following information in addition to the information required for the Business License:

Business Name \_\_\_\_\_

Owner's Name \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

☐ Mobile Food Unit Vehicle Description:

Make	Model	Year	Color	State	License Plate

☐ General Description of Goods to be Sold:


☐ Address of Commissary:

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☐ Mohave County Department of Public Health, Environmental Health Division Permit #

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- ☐ Color digital or print photos showing sides, front, and rear of the mobile food unit.
- ☐ Evidence of a passed fire inspection in Arizona within the preceding 12 months.  
If you need a fire inspection, contact the Lake Havasu City Fire Department at (928) 855-1141.
- ☐ A copy of certificate of insurance as required in City Code Section 5.24.070.E if operating in the public right-of-way (If pursuant to a sanctioned City Event or on a City-owned parcel, insurance shall be taken at time of approval by City.)
- ☐ Will be in public right-of-way
  - ☐ Will not be in public right-of-way

**Certification:**

- ☐ I certify that I have read and understand Lake Havasu City Code Chapter 5.04 Business License and Chapter 5.24 Mobile Food Vendors.
- ☐ I certify that the statements and information provided in this application are true and complete to the best of my knowledge.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_