## Village of Coal City

## **Mobile Vendors & Itinerant Restaurants**

1.	Applicant's Full Name:			
	<u> </u>	Last	First	Middle
2.	Proposed business addres	s:		· · · · · · · · · · · · · · · · · · ·
3.	Give any other name(s) that you have been known by or used and attach a statement giving the reason(s) include maiden name(s) if applicable			
4.	Sex:	Race:		
5.	Date of Birth:  Month	Day Year		
6.	Social Security Number:	<del></del>		
7.	Current Address:			
		Street Address		Apt.#
	City	State	Zip Code	County
8.	Your home telephone nur	nber:		
	Your Cellular telephone	number:		
	Your work telephone number:			

Through my signature, I do hereby verify and affirm all of the following statements:				
(Applicant's full name)				
I have personally read each and every question in this background investigation.				
I have personally answered each and every question in this background investigation.				
I hereby verify that each and every answer is truthful, correct and complete in every respect.				
Applicants Signature:				
Date:				
Do not sign below this line until you are directed to do so				
Investigating Officer's Signature:				
Date:				
Applicant's Signature:				
Date:				
Notary Signature:				
Date:				