# Application For Vending License

Name of Vending Company_____

Vending Company Address_____Unit/Suite_____

City/State/Zip Code_____

Vending Company Phone _____Email_____Fax_____

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**Fee Schedule**

Vending Machine, Arcade Game, Juke Box: **$75 each**

Catering Truck: **$100 Each**

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| PLEASE LIST WHERE MACHINES ARE LOCATED: | | | |
|---|---|---|---|
| **Company Name** | **Address** | **Type of Machine** | **Sticker Number (Office Use Only)** |
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|---|---|
| Total Number of Vending Machines @ $75 Each | |
| Total Number of Catering Trucks @ $100 Each | |
| **GRAND TOTAL:** | |

Statement of Applicant:

Under penalty of perjury, I certify that all of the above statements are true, complete, and accurate.

Print Name:_____

Signature:_____

Date:_____

**Payments can be made payable to:** **Village of Bensenville**
**12 South Center Street**
**Bensenville, IL 60106**