

Application For Vending License

Name of Vending Company _____

Vending Company Address _____ Unit/Suite _____

City/State/Zip Code _____

Vending Company Phone _____ Email _____ Fax _____

Fee Schedule

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

Catering Truck: **\$100 Each**

PLEASE LIST WHERE MACHINES ARE LOCATED:

Company Name	Address	Type of Machine	Sticker Number (Office Use Only)

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

