



**ROSEVILLE POLICE DEPARTMENT**  
1051 Junction Boulevard, Roseville, CA 95678  
(916) 746-1069

**ICE CREAM VENDOR PERMIT APPLICATION (RENEWAL)**

**Permit Number Issued:** \_\_\_\_\_

All information requested on this application is required. Completed applications can take up to 45 days to process. Incomplete applications will be rejected, thus delaying issuance of the permit. **Any Ice Cream Vendor Permit Application should be submitted at least 45 days before the permit is required.** Permits for Ice Cream Vendors shall be issued for a term of one year from the date of issuance without a qualified renewal. Unless exempt pursuant to Section 10.65.020, it is unlawful for any person to operate as an ice cream vendor in the City of Roseville without an Ice Cream Vendor Permit.

**YOU ARE REQUIRED TO SUBMIT THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION:**

|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| 1.  | Copy of applicant/owner and manager/supervisor (Responsible Persons) Driver's License or other valid government-issued photo ID with proof that applicant and manager are over the age of eighteen (18) years.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 2.  | Current photo of the applicant (Taken in front of a solid back drop by Permit Coordinator)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 3.  | <b>\$55.00</b> Non-refundable application fee (Payable by check to "City of Roseville" or Credit/Debit card)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 4.  | LiveScan fingerprint service for any <b>new</b> applicant, or responsible persons, such as managers/supervisors + <b>\$32.00</b> Non-refundable DOJ fee + <b>\$20.00</b> Non-refundable LiveScan fingerprint fee + <b>\$17.00</b> Non-refundable FBI fee – Payable at the time of the LiveScan service. Please bring the LiveScan form to the service and when complete, provide a copy to the Permit Coordinator.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 5.  | Current City of Roseville Business License (HDL Companies <a href="https://roseville.hdlgov.com">https://roseville.hdlgov.com</a> 916-727-6868)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 6.  | Fictitious name filing with Placer County, Refer to California Business and Professions Code beginning with Section 17900 for more information.<br>(530-886-5600) or ( <a href="https://www.placer.ca.gov/1764/Fictitious-Business-Name-Statements">https://www.placer.ca.gov/1764/Fictitious-Business-Name-Statements</a> )<br>If LLC or Corporation- proof of filing, standing, Statement of Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 7.  | Valid Certificate of Public Liability Insurance (Auto liability and General liability) – Provide a copy to the City of Roseville via Ebix at <a href="mailto:roseville@ebix.com">roseville@ebix.com</a> . Provide proof of submission to the permit coordinator.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 8.  | Medical Certification within past 45 calendar days that applicant has tested free for controlled substances and alcohol. (Part 40, Section 40 of Title 49 of the Code of Federal Regulations)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 9.  | Proof of business entity status (W-9 Forms are available on the main IRS webpage) <ul style="list-style-type: none"><li>• If a sole proprietor, please provide your current Form W-9.</li><li>• If a corporation, please provide your current Form W-9, date of incorporation, evidence corporation is in good standing under laws of California, the names and capacities of all officers and directors and name and address of registered agent for service of process.</li><li>• If a limited liability corporation, please provide your current Form W-9, date of formation, evidence limited liability company is in good standing under laws of California, the names and capacities of all members, and name and address of registered agent for service of process.</li><li>• If a partnership, please provide a copy of the partnership agreement the names and contact information for all partners, and a current Form W-9 for all partners.</li></ul> |
| 10. | A complete list of the names and birthdates of all proposed employees who will be employed or retained by the business.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 11. | Proof of current DMV registration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 12. | Placer County Department of Health Services- Health Permit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 13. | Certificate of Training- California Food Handlers Course                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

**ROSEVILLE POLICE DEPARTMENT**

ICE CREAM VENDOR PERMIT– RENEWAL

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

**Review City Municipal Code, Title 10, Div. VI., Chapter 10.65: Ice Cream Vendors**

**BUSINESS ESTABLISHMENT INFORMATION**

☐ Sole Proprietor ☐ Independent Contractor ☐ Corporation ☐ Limited Liability Corporation

☐ Partnership ☐ Other \_\_\_\_\_

Ice Cream Vendor business name: \_\_\_\_\_

Ice Cream Vendor business address: \_\_\_\_\_

Business phone (\_\_\_\_) \_\_\_\_\_ Owner/Manager \_\_\_\_\_

Business/Trade Name that will be on the ice cream truck/vehicle: \_\_\_\_\_

Website Address \_\_\_\_\_

Hours of Operation \_\_\_\_\_

**APPLICANT INFORMATION**

☐ Owner ☐ Other \_\_\_\_\_

Applicant Full Name \_\_\_\_\_

Other Names Used \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Male / Female      Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Scars, tattoos or other distinguishing marks \_\_\_\_\_

California Driver's License # \_\_\_\_\_ Social Security # \_\_\_\_\_

Residence Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

Residential addresses for the past five (5) years (Begin with your current address):

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## ROSEVILLE POLICE DEPARTMENT

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

Employment history for the past five (5) years (Begin with the current or most recent; include the business name, address, and phone number):

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Do you now hold, or have you ever previously held, a permit for an ice cream vendor or similar business?

☐ Yes    ☐ No

If "Yes", provide an explanation:

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Have you ever had a permit/license suspended or revoked for any reason?    ☐ Yes    ☐ No

If "Yes", provide an explanation:

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Have you ever been convicted of any Misdemeanor or Felony crime?    ☐ Yes    ☐ No

If yes, state the nature of the offense(s), jurisdiction where offense occurred, and sentence.

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Are you presently or have you **EVER** been on informal/formal probation or parole in California or elsewhere?

☐ Yes    ☐ No    If yes, provide all details, including probation/parole officer's name, office address and phone.

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Have you ever been convicted of a misdemeanor involving moral turpitude?    ☐ Yes    ☐ No

**What is "Moral Turpitude"?** *Moral turpitude is a legal concept in the United States that refers to the gross violation of standards of moral conduct. Conviction of crimes of moral turpitude may disqualify someone from an employment opportunity.*

*Some examples of crimes involving "moral turpitude" include: grand theft, perjury, vice crimes, bigamy, rape, arson, blackmail, embezzlement, fraud, robbery, prostitution, murder, voluntary manslaughter, narcotic sales and falsifying a crime report. Liquor law violations and disorderly conduct do not fall under this classification.*

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

If yes to the above concerning moral turpitude, provide details and jurisdiction where offense occurred.

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**I give permission to allow a background investigation to verify the information provided.**

☐ YES Initial: \_\_\_\_\_

**Please initial if a copy of a valid Certificate of Insurance has been provided and is on file with the City of Roseville Risk Management Department**

\_\_\_\_\_ Initials

**ON-SITE RESPONSIBLE PERSONS**  
(Managers/Supervisors)

Manager/Supervisor Name \_\_\_\_\_

Other Names Used \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Driver's License Number \_\_\_\_\_ State \_\_\_\_\_

Residence Address \_\_\_\_\_

Residence Phone \_\_\_\_\_ Alternate Contact Phone \_\_\_\_\_

Primary E-mail address \_\_\_\_\_

***Please advise the On-Site Manager/Supervisor (responsible persons) there will be a background check and have them sign below acknowledging and providing permission for the background check. This individual(s) will be required to complete a LiveScan fingerprint service.***

X \_\_\_\_\_

Are there additional On-Site Responsible Persons (Managers/Supervisors) ☐ Yes ☐ No

**Note: If you have more than one manager/supervisor please list their information on a separate page that includes the items mentioned in the "On-Site Responsible Persons" section along with their signature acknowledging there will be a background check. Please provide the separate page(s) along with the rest of the application.**

**CHANGES OF ANY KIND TO THE ABOVE INFORMATION MUST BE REPORTED TO THE ROSEVILLE POLICE DEPARTMENT IN WRITING WITHIN 10 BUSINESS DAYS.**

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

I, the undersigned applicant, hereby certify under penalty of perjury that the answers and statements I have made on all pages of this application and in all supporting documents are true, correct and complete to the best of my knowledge and belief. I understand that any information misrepresented or intentionally omitted will result in automatic denial of this application, and/or revocation of the permit, and may subject me to criminal prosecution. I have read and understand the applicable sections of the Roseville Municipal Code as it applies to ice cream vendors and agree to abide by such ordinances.

\_\_\_\_\_  
APPLICANT: Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
CITY REPRESENTATIVE: Signature

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

▽ FOR POLICE DEPARTMENT USE ONLY ▽

Notes: