**MOBILE STREET VENDOR**
**INSPECTION SHEET**

Date of Inspection_____ Inspecting Officer_____

Applicant's Full Name_____

Applicant's Home Address_____

Applicant's Business Name_____ Phone_____

Vehicle License #_____Year_____Model_____Make_____

V.I.N.#_____ Color_____

Inspection Items: **<u>Any "NO" response on inspection is grounds for rejection:</u>**

1. Warning signs on front of vehicle. _____
2. Warning signs on rear of vehicle. _____
3. Correct letter color and background color on warning signs. _____
4. Stop signal arm correctly mounted (height). _____
5. Stop signal arm sign correct size and colors. _____
6. The four lights on stop signal arm are correct color and size. _____
7. Lights on stop signal arm are flashing alternately. _____
8. Stop signal arm lights correctly mounted on sign. _____

This vehicle does _____ does not _____ meet all requirements set forth in Ordinance #90-53 to be issued a vendor's permit.

Reason for rejection:_____

_____

_____

_____

_____
Signature of Inspecting Officer