



CENTRAL PERMIT OFFICE

CITY OF SYRACUSE, MAYOR BEN WALSH

Food Vendor License Instructions

Overview: This license is required for food trucks, pushcarts, food stands, and mobile stands operating on City property. Locations for food vendors are determined by the Department of Public Works. [Click here for the Food and Mobile Vendor Map](#). For more information, [Click here to read the Ordinance](#).

Application Contents:

- License Requirements
- Application Checklist
- Submittal Instructions
- Food Vendor License Application and License Fees, pages 2 to 3

License Requirements:

- The Proprietor of the business vending food must apply.
- The license must be renewed every year. The license expires on December 31 of the year it is issued.
- The license is non-transferrable to a new proprietor, location, or vendor type.
- A background check and City review must be conducted before issuing this license.

Application Checklist:

- Health Department Inspection and Approval.
- Fire Department Approval (if applicable).
- Certificate of General Liability Insurance, \$500,000 policy listing the City of Syracuse as additionally insured.
- Proof of New York State Certificate of Authority.
- Completed Food Vendor License Application (pages 2 to 3). The application must be signed in the presence of a notary public.
- Application Fee (determined by location on page 2). Check or Money Order payable to Commissioner of Finance.
- Copy of Applicant's Photo Identification: Driver's License, Passport, or equivalent.

Submittal Instructions:

1. Application must be completed in its entirety. Incomplete applications will not be processed.
2. Application, fee, and documents must be submitted to:

City of Syracuse, Central Permit Office

One Park Place

300 South State St.

Syracuse, NY 13202

315-448-8474 | Licensing@syr.gov



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Food Vendor License Application

License Fees:

- Class A: \$1,500
- Class B: \$1,000
- Class C: \$500.00
- Mobile Vendor: \$500
- Vendor of Unprepared Foods: \$300
- 1 Day or Event: \$20

Name of Applicant: _____

Address: _____

Phone: _____

Date of Birth: _____

Business Name: _____

Spot Location or Event: _____

Location where vehicle and/or equipment and all utensils will be sanitized: _____

Is your Business one of the following (circle one)? Corporation / Partnership / Association / Firm

If yes, list all principal officers including their addresses, phone numbers, titles, and dates of birth:

New York State Tax Identification Number: _____



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The undersigned _____ does hereby apply to the License Commissioner of the City of Syracuse, State of New York, for a Food Vendor License pursuant to the Revised General Ordinances of the City of Syracuse.

Indemnification Statement

Upon issuance of this license, the applicant agrees to indemnify, defend, and hold harmless the City of Syracuse, its officers, agents, and employees from and against all damages, claims costs, or expense arising from the issuance of this license, provided that such damage, claim cost or expense is attributable to bodily injury, sickness, disease, or death or damage to property. This indemnity shall survive the expiration and/or termination of this license.

Section below to be completed in the presence of Notary Public:

Applicant Signature _____ Date: _____

Duly sworn to before me on this ____ Day of _____, 20____,

by _____
Applicant Name

SEAL/STAMP

Notary Public Print Name

Notary Public Signature