



City of
Los Banos
At the Crossroads of California

Community & Economic
Development Department
520 J St.
Los Banos, CA 93635
Phone: (209) 827-7000 ext. 2431
www.losbanos.org

MOBILE FOOD VENDOR PERMIT APPLICATION SUBMITTAL REQUIREMENTS

- ☐ Completed Application
 - If the applicant is not the property owner(s), the property owner(s) shall designate the applicant as the authorized agent to act on his or her behalf by way of a signed, dated, and notarized statement and both (or all) shall sign the application.
- ☐ Application fee - \$625.83 initial; \$70.91 renewal
- ☐ Proof of Completion of Livescan - a background check through the Los Banos Police Department must be obtained for the mobile food vendor and each person operating or vending out of the mobile unit
- ☐ Two (2) passport quality photographs of each person operating or vending out of the mobile unit, which shall measure 2"x2" showing the head and shoulders of the employee(s) in a clear and distinguishing manner.
- ☐ Photos – all four (4) sides of the mobile vending unit
 - The mobile vending unit shall have identification on the right and left side of the unit; letters are to be a minimum of four (4) inches and consist of the following information:
 - Name of business
 - Phone number
 - Business License Number
 - Vendor Permit Number
- ☐ Proof of current vehicle registration (for mobile food vending unit, if applicable)
- ☐ Copy of current Merced County Environmental Health Permit
- ☐ Proof of automobile insurance as required by the vehicle code (for mobile food vending unit, if applicable)
- ☐ If the mobile vendor is operating on public property, the mobile vendor shall provide the following:
 - Copy of Certificate of Liability Insurance Policy providing minimum coverage of \$1,000,000 for injury or death arising out of the operation of the mobile vending unit, if vending on public right-of-way
- ☐ If the mobile vendor is operating on private property, the mobile vendor shall provide the following:
 - Site Plan
 - 10 color copies

- 8.5" x 11" format
- Depicting the relationship of the mobile food vending unit to the surrounding area. The site plan shall include sufficient parking for the primary use and the mobile vendor, for all proposed stationary locations. Parking spaces shall be marked as required by zoning regulations.
- Letter from the business or property owner permitting the mobile vendor to locate on the site and providing the required restroom facilities for food service workers, stating the hours that the facilities would be made available
- Electronic copy of full submittal on USB drive

Note: Staff may deem additional submittal information necessary such as a noise study, biological assessment, parking study, drainage report, arborist report, sight line analysis, infrastructure calculations, or master plans to adequately analyze the project, complete environmental review, or make recommendations to Elected or Appointed Officials.



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Uniform Application

In order for Applications to be deemed complete under California Government Code Section 65943, the following items must be provided:

1. Completed Uniform Application
2. Development Plans as required by Submittal Requirements
3. Appropriate Filing Fee

GENERAL REQUIREMENTS (Print Clearly or Type)

Property Owner's Name:		(staff use only)
Address:		File No.:
Home/Cell No.:	Work No.:	Related Files:
E-mail Address:	Fax No.:	
Applicant's Name:		Date Rec'd:
Address:		Rec'd by:
Home/Cell No.:	Work No.:	Fees Paid:
E-mail Address:	Fax No.:	Receipt No.:
Representative's Name:		Approved by:
Address:		Date Approved:
Home/Cell No.:	Work No.:	Resolution No(s).:
E-mail Address:	Fax No.:	

Please Note: If the applicant is not the property owner, the property owner shall designate the applicant as the authorized agent to act on his or her behalf and both shall sign this application.

TYPE OF APPLICATION (check all that apply)

- | | |
|---|---|
| ☐ Administrative Permit (AP) | ☐ Mobile Food Vendor Permit (MFVP) |
| ☐ Annexation (ANX) | ☐ Planned Development Reclassification (PDR) |
| ☐ Appeal | ☐ Pre-zone |
| ☐ Area Plan | ☐ Rezone (ZC) |
| ☐ Block Party Permit | ☐ Sign Review (SR) |
| ☐ Conditional Use Permit (CUP) | ☐ Site Plan Review (SPR) |
| ☐ Cottage Food Operations (CFO) Permit | ☐ Special Events Permit (SEP) |
| ☐ Donation/Collection Bins Permit | ☐ Temporary Uses Permit (TUP) |
| ☐ Farmers' Market Permit | ☐ Tentative Parcel Map (TPM) |
| ☐ Final Development Plan (FDP) | ☐ Tentative Tract/Subdivision Map (TTM) |
| ☐ General Plan Amendment (GPA) | ☐ Vesting Tentative Tract/Subdivision Map (VTTM) |
| ☐ Initial Environmental Assessment | ☐ Variance |
| ☐ Master Development Plan | ☐ Other: _____ |

PROJECT DESCRIPTION (attach additional sheets if necessary)

Description and purpose of proposal:

Address and Location of Property:

Assessor's Parcel Number(s):

Current Zoning:

Proposed Zoning (if applicable):

Current General Plan (GP) Designation:

Proposed GP Designation (if applicable):

Existing Use of Property:

Description of Surrounding Uses:

NON-RESIDENTIAL PROJECTS OFFICE/ RETAIL/ INDUSTRIAL/ INSTITUTIONAL PROJECT SUMMARY TABLE

SITE AREA DISTRIBUTION

Site Area: Gross acres: _____ Net acres: _____

Proposed Phasing: _____

Building Area: Existing Structures: _____ sq ft New Structures: _____ sq ft

Existing Floor Area Ratio (FAR): _____ Proposed Floor Area Ratio (FAR): _____

Height: _____ sq ft

Number of Floors: _____

For **Commercial** Developments:

Market/Service Area: ☐ Neighborhood ☐ City ☐ Regional

Square Footage: _____

For **Industrial** Developments:

Use: ☐ Warehouse/Distribution ☐ Manufacturing ☐ Multi-tenant ☐ Other

Square Footage: _____ Estimated Employees Per Shift: _____

For **Institutional** Developments:

Use/Function: _____

Estimated Employees Per Shift: _____

Estimated Number of Occupants: _____

BUILDING INFORMATION

Occupancy Classification: _____

Occupancy Code: _____

Type of Construction: _____

Roof Materials: _____

AREA DISTRIBUTION (based on net area)

Acres/Sq Ft

% of Net Area

Building Coverage: _____

Vehicular (Paved) Coverage: _____

Landscape Coverage: _____

PARKING

Type of Use	Parking Ratio	# of Spaces Required	# of Spaces Provided
TOTALS			

Attach separate sheet(s) if necessary to provide complete Land Use/Unit/Density/Area Parking breakdown.

RESIDENTIAL PROJECT SUMMARY TABLE (if applicable)

PROJECT AREA

Site Area: Gross acres: _____ Net acres: _____

No. of Phases: _____

DWELLING UNITS (based on net acres)		Number	Net Density
Single Family Detached			
Single Family Attached			
Multi-Family/Condominium			
	Studio		
	One Bedroom		
	Two Bedroom		
	Three Bedroom		
	Four or More Bedrooms		
	TOTAL		

AREA DISTRIBUTION (based on net area)		Acres/Sq Ft	% of Net Area
Building Coverage			
Landscape Coverage			
Vehicular (Paved) Coverage			
Common Open Space			
Private Open Space (per unit)			N/A

PARKING	Parking Ratio	# of Units	Spaces Req'd	Spaces Provided
Single-Family Detached				
Single-Family Attached				
Multi-Family/Condominium				
TOTAL				

Attach separate sheet(s) if necessary to provide complete Land Use/Unit/Density/Area Parking breakdown.

PROJECT LOCATION LETTER OF AUTHORIZATION

PROJECT LOCATION

General Location/Address of Project:

Assessor's Parcel No(s):

Precise Legal Description (Attach. Required for the following : Rezoning, Annexation, Street or Alley Abandonment):

AFFIDAVIT

If property owner is a trust, partnership, LLC, then the signature shall be a corporate officer. Attach additional sheets if necessary.

I, _____, hereby certify that I am the applicant in the foregoing application, that I have read the foregoing application and know the content thereof and state that the same is true and correct to the best of my knowledge.

Applicant (signature)

Applicant (print name)

I, _____, hereby certify that I am the owner (if other than the applicant) of real property involved in this application, do hereby consent to the filing of this application. Attach separate sheets if multiple property owners.

Owner (signature)

Owner (print name)

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REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

CA0240500

ORI (Code assigned by DOJ)

License, Certificate or Permit

Authorized Applicant Type

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

City of Los Banos

Agency Authorized to Receive Criminal Record Information

00414

Mail Code (five-digit code assigned by DOJ)

1111 G St

Street Address or P.O. Box

Chetna Patel

Contact Name (mandatory for all school submissions)

Los Banos

City

CA ☐

State

93635

ZIP Code

2098277070

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name: (AKA or Alias)

Last Name

First Name

Suffix

Sex ☐ Male ☐ Female

Date of Birth

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing

Number

(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Misc.

Number

(Other Identification Number)

Home

Address Street Address or P.O. Box

City

State ☐

State

ZIP Code

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature

Date

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: ☒ DOJ ☐ FBI

(If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)

If re-submission, list original ATI number:

(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box

Telephone Number (optional)

City

State ☐

State

ZIP Code

Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



REQUEST FOR LIVE SCAN SERVICE

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:

Department of Justice
Bureau of Criminal Information & Analysis
Keeper of Records
P.O. Box 903417
Sacramento, CA 94203-4170



REQUEST FOR LIVE SCAN SERVICE

Privacy Act Statement

Authority. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.



REQUEST FOR LIVE SCAN SERVICE

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.²
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.³

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.⁴

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) *You can find additional information on the FBI website at <https://www.fbi.gov/about-us/cjis/background-checks>.*

¹ Written notification includes electronic notification, but excludes oral notification

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 28 CFR 50.12(b)

⁴ See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)

City of Los Banos
Community and Economic Development
Planning Entitlements/Projects Fee Schedule

License/Permit/Entitlement Type	Basic Fee	State Fee	Additional Fee	Notes	Total Fee
Mobile/Sidewalk Vendor Permits					
Mobile Vendor Permit Initial	\$ 625.83				\$ 625.83
Mobile Vendor Permit Renewal	\$ 97.62				\$ 97.62
Sidewalk Vendor Permit Initial	\$ 450.00				\$ 450.00
Sidewalk Vendor Permit Renewal	\$ 450.00				\$ 450.00
Cottage Food Operator Permit					
Cottage Food Operator Permit (one time)	\$ 455.43				\$ 455.43
Planning Permits					
Administrative Permit - other	\$ 720.98			Deposit/ Cost Recovery Contract Required	\$ 720.98
Special Events Permit - minor event	\$ 109.33				\$ 109.33
Special Events Permit - major event	\$ 311.14				\$ 311.14
Special Events Permit - major event: Religious Processions (1.25 miles one way max)	\$ 311.14		\$ 444.22		\$ 755.36
Special Events Permit - major event: Street Closures (3 blocks or less)	\$ 311.14		\$ 229.60		\$ 540.74
Special Events Permit - major event: Parades (standard May Day Parade route)	\$ 311.14		\$ 1,517.64		\$ 1,828.78
Residential Neighborhood Block Party Permit	\$ 203.90				\$ 203.90
Farmers' Market Permit	\$ 230.42				\$ 230.42
Temporary Use Permit - minor use	\$ 230.42				\$ 230.42
Temporary Use Permit - major use	\$ 311.14				\$ 311.14
Miscellaneous					
Donation Collection Bin Initial	\$ 432.81			Non-refundable	\$ 432.81
Donation Collection Bin Renewal	\$ 163.24			Non-refundable	\$ 163.24
Signage					
Master Sign Plan	\$ 1,681.41				\$ 1,681.41
Sign Review	\$ 82.00				\$ 82.00
Temporary Sign Review	\$ 82.00			Per occurrence	\$ 82.00
Planning Project Entitlements					
Annexation	\$ 23,731.72			Deposit/ Cost Recovery Contract Required	\$ 23,731.72
General Plan Amendment	\$ 8,034.82			Deposit/ Cost Recovery Contract Required	\$ 8,034.82
Zone Change/Pre-Zone	\$ 7,489.10			Deposit/ Cost Recovery Contract Required	\$ 7,489.10
Conditional Use Permit	\$ 1,940.24			Deposit/ Cost Recovery Contract Required	\$ 1,940.24
Site Plan Review	\$ 3,133.79			Deposit/ Cost Recovery Contract Required	\$ 3,133.79
Variance	\$ 1,594.30			Deposit/ Cost Recovery Contract Required	\$ 1,594.30
Tentative Subdivision Map - up to 100 lots	\$ 9,259.06			Deposit/ Cost Recovery Contract Required	\$ 9,259.06
Tentative Subdivision Map - 101+ lots	\$ 12,101.86			Deposit/ Cost Recovery Contract Required	\$ 12,101.86
Revised Tentative Map	\$ 4,575.05			Deposit/ Cost Recovery Contract Required	\$ 4,575.05
Planned Development	\$ 4,554.77			Deposit/ Cost Recovery Contract Required	\$ 4,554.77
Development Agreement	\$ 3,500.00			Deposit/ Cost Recovery Contract Required	\$ 3,500.00
Final Development Plan	\$ 2,000.00			Deposit/ Cost Recovery Contract Required	\$ 2,000.00
Environmental Review/Categorical Exemption	\$ 197.75			Deposit/ Cost Recovery Contract Required	\$ 197.75
Negative Declaration/Initial Study	See Notes			Actual Cost + 20%/Deposit/Cost Recovery Contract	\$ -
Environmental Impact Report	See Notes			Actual Cost	\$ -
Minor Subdivision/Parcel Map	\$ 1,024.15			Deposit/ Cost Recovery Contract Required	\$ 1,024.15
Lot Line Adjustment/Parcel Merger	\$ 415.16				\$ 415.16
Reimbursement Agreement	\$ 3,500.00			Deposit/ Cost Recovery Contract Required	\$ 3,500.00
Appeal	\$ 2,587.84				\$ 2,587.84
Time Extension	\$ 2,404.91				\$ 2,404.91

Notes:

State established \$1.00 fee for Business Licenses as mandated by Senate Bill 1186 effective January 1, 2013. State Fee increased to \$4.00 as mandated by Assembly Bill 1379 effective January 1, 2018 thru December 31, 2023.

Fees adopted by City Council Resolution No. 6131 on 9/18/19; fees effective 12/1/19

Commercial Business License renewal basic fee subsidized/reduced by City Council Resolution No. 6158; adopted 11/20/19; fee effective 12/1/19