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## **Motorized Refreshment Vehicle Owner (V15) Operating Information** **Questionnaire**

1. Does your vehicle use a heater?  
 Yes  
 No
  
2. Does your vehicle use a propane heater?  
 Yes  
 No
  
3. Does your vehicle have an ice cream maker?  
 Yes  
 No
  
4. Does your vehicle use natural gas heat?  
 Yes  
 No

Date:

Client Name:

Client Signature: