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Non- Motorized Refreshment Vehicle Owner (V27) Operating Information Questionnaire

- 1. Please provide your Trailer or Cart Storage location: _____
- 2. Does your cart only sell ice cream?
 - **O** Yes (If yes, please proceed to the end)
 - **O** No (If no, please answer question 3 & 4 below)
- 3. Is your food cart a Trailer?
 - O Yes
 - O No
- 4. Please advise what type of energy source/fuel is used to prepare food:
 - O Not applicable (food is prepared off site or electrical)
 - Natural Gas please submit proof of inspection by a <u>Technical Standards and Safety Association (TSSA)</u> certified technician*
 - Propane please submit proof of inspection by a <u>Technical Standards and Safety Association (TSSA)</u> certified technician*
 * Some certified technicians are listed on the TSSA site
 - O Wood-fired
 - **O** Electric

Date:

Client Name:

Client Signature: