

Food Truck/Wagon

\$30/day & \$10 for each Consecutive Day
\$80 one week
\$175 one month
\$250 three months
\$400 one year

Food Cart

\$15/day & \$5 for each Consecutive Day
\$40 one week
\$90 one month
\$125 three months
\$200 one year

Other Peddler/Solicitor & Transient Merchant Fees

1 Day \$ 10.00 per person
2 Days \$ 15.00 per person
3 Days \$ 20.00 per person
1 Week \$ 25.00 per person
1 Month \$ 75.00 per person
3 Months \$150.00 per person

Permit # _____

CERTIFICATE OF REGISTRATION – PEDDLER/SOLICITOR/TRANSIENT MERCHANT
*Food vendors are prohibited from set-up within one block of an existing restaurant or pub with food service.
Additional/separate approvals may be required for major festivals/special events.*

APPLICANT'S NAME: _____
(First) (Middle) (Last)

ADDRESS: _____

BUSINESS/ORGANIZATION NAME _____

ADDRESS: _____ PHONE: _____

Requested Date(s) for Permit: FROM _____ TO _____
Month/Day/Year Month/Day/Year

Briefly describe the nature of your business and/or the goods to be sold: _____

Proposed Method of Operation: Door to Door (9am-5pm; No Sundays) Business to Business Other _____

Fixed Location: _____ Have you obtain the property owner's approval? : Yes No
Address

Property owner's name and contact phone number _____

Has a Certificate of Registration ever been revoked? Yes No

Have you ever been convicted of a violation or a felony under the Laws of the State/other state/Federal Law?

Yes No If yes, please explain: _____

Please list the three most recent communities where you have conducted business: _____

Organization is classified as: Profit _____ Tax ID # _____ Non-Profit _____ Tax ID # _____

VENDOR IS RESPONSIBLE FOR ALL REQUIRED LICENSES

Driver's License Number: _____ State of Issue: _____

****Please list all persons who will be soliciting on behalf of the organization on the back of this application.**

I hereby certify all information provided by me in this application is true to the best of my knowledge.

Signature of Applicant _____ Date: _____

The Fire Chief must approve for food vendors cooking with open flame

Fire Chief Authorization _____ Date: _____

Chief of Police Authorization _____ Date: _____

Fee Amount \$ _____ Received By: _____ Date: _____

Once approved, the applicant is authorized to conduct the activities described above.