

## Application for Vending Permit

### Contact Information

Company Name: \_\_\_\_\_

Festival/ Event Name: \_\_\_\_\_

Company/ Organization Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone number of company: \_\_\_\_\_

Company/ Organization Email address: \_\_\_\_\_

Are you a Charitable or Non-For-Profit Organization? Yes \_\_\_\_ No \_\_\_\_

Registered charity/ organization number: \_\_\_\_\_

Please check of type of Application

Development Permit

Vending Permit

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### Applicant/ Correspondent Information

Applicant/ Correspondent Name: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone number of applicant: \_\_\_\_\_

Email of applicant/ correspondent: \_\_\_\_\_

Insurance provider name: \_\_\_\_\_

Insurance policy number: \_\_\_\_\_

Is this yearly, seasonal, or a limited time frame vending? \_\_\_\_\_

If a limited time frame or seasonal, what dates are you applying for? \_\_\_\_\_

What are the intended hours of operation?

Open: \_\_\_\_\_ Close: \_\_\_\_\_

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### Umbrella Event

If Umbrella Event what is your Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Rain date: \_\_\_\_\_

On the last page please list the vendors business name, name of contact for business, vendor's phone number and product or service for each vendor operating at the event. Vendors include all food vendors, entertainers, and other businesses providing wares or services.

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**Property Owner Information**

Property Owners Name: \_\_\_\_\_

Property Owners Phone Number: \_\_\_\_\_

Property Owners Email Address: \_\_\_\_\_

Property Owners Mailing Address: \_\_\_\_\_

I \_\_\_\_\_, **(print property owners name)** hereby give permission for the applicant to vend from my property in accordance with the terms of this application.

Property Owner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

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**Site Location, Event Location or Proposed Mobile Route**

Please provide the Site Address, PID# or Civic Address of your preferred site. Please see the attached maps and indicate your preferred location.

Site Location: \_\_\_\_\_

PID: \_\_\_\_\_

Civic Address: \_\_\_\_\_

If Vending from a food truck on a private lot please include a site plan to indicate the location on the lot, please show the set backs from all property boundary lines and any desired signage, along with its type and size.

If a mobile vending operation, show a map of proposed route and stop locations.

If an Umbrella Event please describe where participating Vendors will be located: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Please indicate the type of product that best describes your service or wares:**

- Amusement (rental bikes, fishing gear, scooters, fitness class etc.)
- Entertainment (performance)
- Food and beverage service (prepared food, ice cream)
- Other (art, clothing, jewelry, information etc.)

Additional description of Vending Merchandise (please explain): \_\_\_\_\_

If selling food is there proper containers for the disposal of garbage, recycling, and organics? \_\_\_\_\_

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**Each vending unit requires a separate application. Please select the vending unit type below that describes your unit.**

- Mobile Canteen (Mobile motor vehicle offering food, goods, or services)
- Outdoor Stand/ Vehicle (outdoor table, pushcart, motorless wheeled device to display all goods, wares or other merchandise)

- Outdoor Farmers Market (5 or more vendors selling products of the farm, forest, sea and crafts)
- Auxiliary Vending Operator (incidental to and located in front of the main use of land or building)
- Other:

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**Please provide the following information:**

Description of vending apparatus: \_\_\_\_\_

Provincial Vehicle Registration Number, Make, Model and Year (if a truck and trailer include registration for both): \_\_\_\_\_

Classification: \_\_\_\_\_

Date of Vehicle Inspection: \_\_\_\_\_

Vehicle Inspection Number: \_\_\_\_\_

Health Permit No.: \_\_\_\_\_

Fire Inspection Certificate Number: \_\_\_\_\_

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I hereby make application to the Town of Yarmouth for a Vendor's Permit stating the information in this application is true and complete and that I agree to comply with the provisions of the Town of Yarmouth's Vending By-Law.

Applicant Name (Print) \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Bylaw Enforcement Officer

\_\_\_\_\_ Date: \_\_\_\_\_  
Development Officer

Are photos of each vending unit attached? Yes \_\_\_\_ / No \_\_\_\_

Is a copy of the health permit attached? Yes \_\_\_\_ / No \_\_\_\_

Copy of fire inspection attached? Yes \_\_\_\_ / No \_\_\_\_

Photos of fire extinguisher in place attached? Yes \_\_\_\_ / No \_\_\_\_

If mobile vending operation, map of proposed route and stop locations attached? Yes \_\_\_\_ / No \_\_\_\_

Copy of the proposed site maps attached? Yes \_\_\_\_ / No \_\_\_\_

Is proof of insurance attached? Yes \_\_\_\_ / No \_\_\_\_

Attaches list of Vendors for Umbrella Event Yes \_\_\_\_ / No \_\_\_\_

