



APPLICATION FOR VENDOR LICENSE

***APPLICATION AND PAYMENT MUST BE RECEIVED FIVE (5) BUSINESS DAYS PRIOR TO EVENT**

1. Name (include all previous names used):

2. Owner of Company/Business:

3. Permanent Home or Business Address:

City: State: Zip:

4. Phone Number: 5. Cell 6. Email:

7. Address While in Warren (if applicable):

Permanent

8. Location Mobile 9. Identification (Drivers license#): Other:

Mobile

10. Merchandise to be sold **(Please Be Specific)**. If vending food, you are also subject to retail Food License requirements:

11. Date, Hours and Location (s) where you will be selling the above merchandise:

12.. **Certificate of Insurance is attached (if applicable):

YES NO

The information I have provided in this application and attachment(s) are true and correct to the best of my knowledge. I understand that the permit can be revoked and all fees forfeited and my permit terminated for falsification of information or failing to comply with all state or local laws.

Applicant agrees to indemnify and hold the City of Warren harmless from any and all claims, demands, or losses, causes of action, damages, lawsuits, judgements, including attorney's fees and costs which result from or are in any way related to the Vendor, its employees, customers or any activity whatsoever conducting on or around the premises to which this application pertains.

13. Signature of Applicant

14. Date:

Please Note: Application must be completed and fee (per day) paid for EACH Vendor. Applications received less than five (5) business days prior to event **may be rejected**.

** Certificate of Insurance is required for persons wishing to occupy any City Street, Alley, Sidewalk, or Public Ground with any stand or vending cart.

OFFICIAL USE ONLY	
<input type="checkbox"/> Approved	
<input type="checkbox"/> Rejected	By <input type="text"/>
	Date <input type="text"/>
Fee Collected: <input type="text"/>	Date Paid <input type="text"/>
Vendor Permit Number: <input type="text"/>	