## Town of Bishop's Falls Mobile Canteen/Vendor Permit Application Form

FOR OFFICE USE ONLY				
Receipt #:	Permit #:		Date	Issued:
Receipt #.	remm #.		Date	issued.
PART 1 – APPLICATION INFOR	MATION			
Name				
Mailing Address				
Civic Address				
Telephone Number				
Cell Number				
Email address				
PART 2 – PERMIT TYPE				
Please indicate the permit type you are a	pplying for by	ticking the approp	oriate box below	v.
Non-Renewing Permit				
Daily (24 hour period) \$25.00		onal (4 months) 00 fee		Annual (12 months) \$225.00 fee
Renewing Permit (see regulation 10 (b)	to determine ij	you qualify)		
Greater than 12 months \$225.00 fee per year				
PART 3 – VENDING SITE				
Please indicate your proposed vending site locations listed below. If you are proposing deed and survey). Where the land is owne granting you permission to operate a mobile	g an alternative d by a person o	vending site, please other than the applic	include evidence ant(s), please als	e demonstrating land ownership (i.e
Approved vending sites				
With approval from the operator, th		nicipal Park (lower t	field, paved section	on)
Station Road east of the boat launch	ı/slipway.			
Other vending site (see paragraph above). I	Please describe	the location of the si	te.	
PART 4 – MOBILE CANTEEN/V				
Please provide the following information	n regarding yo	ur proposed mobil	e canteen/vendo	or:
(a) What products and/or services a	re you selling	?		
(b) Is your operation <i>for-profit</i> or <i>no</i>	ot-for-profit?	If <i>not-for-profit</i> , ho	ow are the profi	ts being disbursed and at what

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percentage?

(c) Please describe the vehicle (i.e. make, model, year, condition, etc.) you are using for a mobile canteen/vendor. Please attach a copy of your motor vehicle registration and insurance for the mobile canteen.						
permit/licence issued by th	en/vendor is selling food, beve e Government of Newfound e issued by the Town until this	dland and Labrador with t	ou must provide a copy of your this application. Under no			
As part of the application please ensure you submit the following documentation:						
O Confirmation of land ownership and access if you are applying for a vending site other than those already approved.						
<ul> <li>Motor registration and insurance for the vehicle that will be used for the mobile canteen/vendor.</li> </ul>						
<ul> <li>Permit/Licence from the Government of Newfoundland and Labrador if you are operating a mobile canteen/vendor that sells food, beverages and/or consumables.</li> </ul>						
PART 5 – DECLARATIO	ON OF APPLICANT					
my knowledge. I further demunicipal and provincial reg	clare that the permit I may be gulations. Without limiting of and to adhere to the <i>Mol</i>	e issued will be executed in a the generality of the latter,	true and accurate to the best of accordance with all applicable I acknowledge that it is my gulations 2015 as adopted and			
Applicant Name		_ D	Pate			
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For Office Use Only						
Date Application Received:	Received By:	Permit Type	Permit Fee			
Staff Review						
**	Denied Application Referred	d to Council				
Staff Comments/Permit Conditions:						
Council Review (if applicable) Standing Committee Number:	Public Meeting Number:	Motion Number:	Decision:			
Permit Conditions:						
Signature of Town Clerk or Town Clerk Designate		Date				

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