

SPECIAL DIRECTIVES FOR 2011 STATIONARY VENDING APPLICATIONS

In anticipation of the requests for stationary vending applications for the six (6) public locations for 2011, the following procedure shall be followed:

1. The Emergency Manager, or his designee, shall consider all stationary vending applications for 2011.
2. The Emergency Manager, or his designee, may establish deadlines for applications for stationary vending permits for 2011.
3. The minimum liability insurance required by the Vending Ordinance shall be not less than \$100,000.00 per occurrence.

FEE SCHEDULE

Description	Charitable	Commercial Stationary	Commercial Moving
Application Fee (Non-refundable)	\$10	\$30	\$30
Daily License	NA	\$50	\$50
Seasonal License	NA	\$1,000	NA

Any questions regarding the Vending application process may be directed to the City Inspections Department's office at (269) 927-8400.

**CITY OF BENTON HARBOR
APPLICATION FOR VENDOR LICENSE**

Check Vendor Type, as applicable:

COMMERCIAL CHARITABLE MOVING STATIONARY

Applicant

Your Name: _____ Today's Date: _____

Your Permanent Address: _____ For CC consideration on: _____

City: _____ State: _____ Zip: _____ Email: _____

Your Daytime Phone: _____ Evening Phone: _____

Name of Business/Organization: _____

Nature of Business: _____ Your Affiliation with Business/Organization: _____

Address of Business/Organization: _____

City: _____ State: _____ Zip: _____ Email: _____

Business/Organization Daytime Phone: _____ Evening Phone: _____

Have you ever been convicted of any crime, misdemeanor or violation of a municipal ordinance? Y / N If YES, describe nature of the offense and the punishment or penalty assessed _____

Attach a listing of all persons who will be vending under this application; include name, address & copy of state identification. # Persons _____

If applicant is a Charitable organization, you must attach a copy of the proof of tax exempt status. Y / NA

Vending Information

What DATE do you plan to vend: _____ During what TIMES do you plan to vend: _____

What LOCATION do you plan to vend from: _____
Must attach a map/diagram indicating location/route.

From what type of structure will you be vending? *Must attach picture of the booth/cart/stand/vehicle.* _____

What types of products do you plan to sell? *Must list all!* _____

What is the origin of these goods; where are they produced/manufactured/purchased? _____

How will the goods be delivered to you? _____

How will the goods be delivered to customers? _____

PLEASE NOTE

1. All applications for Commercial Licenses must be approved by the City Commission.
2. Any License issued is valid only for the dates set forth on the license, without regard to any cancellation or postponement of related activities.
3. Licenses are not transferrable.
4. An ID badge must be worn by vendor at all times while vending; ID badge may be provided by the City or the City will approve badges provided by vendor.
5. Each stationary vendor must post the license issued by the City of Benton Harbor in a prominent location.
6. County Health Department Certification required for all food sales.
7. If your business requires the use of weighing or measuring devices, you must submit a certificate from the State Inspector of Weights, Scales & Measures.

By signing this application you affirm that the information provided is accurate and truthful to the best of your knowledge.

Photo ID: _____ Approved by Public Safety Dept. _____ Approved by City Inspections Department _____ Approved by City Commission _____

App. Fee: _____ Ch#/Cash: _____ Date: _____ Health Department Certificate _____ Weights, Scales & Measures _____

Comments: _____

Original: City Inspections Department

Copy: Public Safety Department