



REGION OF QUEENS MUNICIPALITY

VENDING PERMIT APPLICATION

**VENDOR TYPE:**

- Individual Vendor
- Mobile Vendor – Appendix “A”
- Group Vendor – Festivals & Large Events
- Non-Profit
- Student – Non-Profit

**FEES:**

- |   |          |
|---|----------|
| <input type="checkbox"/> Weekly Permit Fee  | \$25.00  |
| <input type="checkbox"/> Monthly Permit Fee                                       | \$75.00  |
| <input type="checkbox"/> Monthly Permit Fee - Mobile Vendor w/ Electrical Hook Up | \$100.00 |
| <input type="checkbox"/> Yearly Permit Fee  | \$150.00 |
| <input type="checkbox"/> Yearly Permit Fee – Mobile Vendor w/Electrical Hook Up   | \$200.00 |
| <input type="checkbox"/> Group Fee – Annually                                     | \$200.00 |
| <input type="checkbox"/> Non Profit Festival or Event                             | \$50.00  |

***(Please Print)***

1. Name of Applicant: \_\_\_\_\_
2. Group/Association or Business (if applicable): \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_
4. Telephone Numbers:    Primary: \_\_\_\_\_    Alternate: \_\_\_\_\_
5. Email Address:         Primary: \_\_\_\_\_    Alternate: \_\_\_\_\_
6. Description of Stand, including Dimensions (if applicable): \_\_\_\_\_  
\_\_\_\_\_
7. Description of Goods or Services being sold: \_\_\_\_\_  
\_\_\_\_\_
8. If using a vehicle as part of your stand, please state Make, Model, Year, and Licence Plate Number: \_\_\_\_\_
9. Please state the municipal location(s) or Festival/Event for Vending where you would prefer to conduct your vending: \_\_\_\_\_  
\_\_\_\_\_

**\*NOTE:** Council, from time to time, authorizes the use of municipal lands for special events and festivals. During such times, Vendors may be required to relocate to other areas to conduct their business. Vendors may have an opportunity to participate in these special events on municipal lands; however, this shall be at the discretion of the event organizer. Should a Vendor be required to relocate, every attempt will be made to give as much advance notice as possible of the dates of these events.

10. I, \_\_\_\_\_, acknowledge that I have received a copy of the Vending Bylaw and agree to comply with all of its requirements on my behalf and on behalf of my business or association, if applicable. I understand that failure to comply with these requirements may result in this licence being revoked.

11. Dated at Liverpool, Nova Scotia this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
POSITION

\*\*\*\*\*

**(OFFICE USE ONLY)**  
 Date Received \_\_\_\_\_ Date Permit Issued/By Whom \_\_\_\_\_  
 Date Payment Received \_\_\_\_\_ Amount \_\_\_\_\_ Receipt Number \_\_\_\_\_