STREET VENDOR APPLICATION INSTRUCTIONS

(This page does not need to be submitted with application)

Sketch plan must accompany this application on separate paper and include the following:

- Area served by vendor unit including roads, right-of-ways, water bodies, and other important landmarks
- Dimensions of vendor unit along with color photo, if available.
- Sketch showing proposed location of vendor unit with approximate setbacks from closest property boundaries and water, if applicable.
- Also indicate any proposed parking that may occur for vendor's vehicle or the vehicles of patrons accessing the vendor.

Have You:

- Completed the application in entirety as it applies to your project?
- Included any additional information that might be helpful in reviewing your application?
- Attached proof of your required licensing from the State of Maine?
- Attached proof of motor vehicle registration for the vendor unit.
- Attached letter from Newcastle property owner if applicable?
- Signed the application?
- Included the fee?

Please note $50.00 application fee must accompany the application and is non-refundable. Applications will not be accepted without payment.

Note:

- A street vendor license is required for the selling or offering or exposing for sale any food, goods, wares, merchandise or products of any kind for more than seven days in any calendar year.
- The application and license are area specific. If a vendor desires to operate in more than one area at the same time they shall obtain a separate license for each area of business.

NEWCASTLE STREET VENDOR APPLICATION

APPLICANT:_____ DATE:_____

NAME OF VENDOR BUSINESS:_____
(Indicate DBA, LLC, Incorporated and include Tax Identification Number)

STATE PERMIT/LICENSING NUMBER:_____

MAILING ADDRESS:_____

PHONE NUMBERS:_____/_____/_____

EMAIL ADDRESS:_____

LANDOWNER NAME FOR LOCATION OF OPERATION:_____

MAILING ADDRESS:_____

LANDOWNER PHONE NUMBERS:_____

PHYSICAL LOCATION OF VENDOR OPERATION: (Include Map & Lot #_____)

_____

_____

DAYS OF WEEK AND HOURS OF VENDOR OPERATION:_____

_____

INDICATE IN DETAIL NATURE OF BUSINESS:_____

_____

APPLICATION AND AMOUNT OF FEE RECEIVED: Date:_____ $_____ Initials of clerk _____

DATE SUBMITTED TO SELECT BOARD:_____

DATE APPROVED BY SELECT BOARD:_____

INITIALS OF 3 OR MORE SELECT BOARD MEMBERS: _____ _____ _____ _____ _____