



TOWN OF LUNENBURG

2020/21 VENDING PERMIT APPLICATION FORM

1. APPLICANT NAME: _____

2. COMPANY NAME: _____
(if different from above)

2. STREET AND MAILING ADDRESS: _____

(postal code)

3. PHONE: _____ (home) _____ (work)
_____ (fax) _____ (email)

5. VENDING PERMIT(S) REQUESTED:

TYPE # PERMIT FEE/PERIOD

Busker		\$10.40/day or \$25.95/month <i>(please indicate)</i>
Coin Operated machines		\$51.90./year juke box, \$25.95/pinball and \$15.60/year other automated vending machines
Craft Market		\$51.90./day or \$520.00/year <i>(please indicate)</i>
Door to Door Peddler		\$25.95/day, \$103.85./month, \$363.40./6 months or \$623.00./year <i>(please indicate)</i>
Farmers' Market		\$51.90./day or \$520.00/year <i>(please indicate)</i>
Fruit, Vegetables and/or Fish Stand or Vehicle		\$10.40/day, \$103.85./month, \$363.40/6 months or \$520.00./year <i>(please indicate)</i>
Mobile Canteen		\$520.00/year
Walking Tour		\$207.70./3 months, \$311.50./6 months or \$520.00/year <i>(please indicate)</i>
All Other Vendors		\$10.40/day, \$103.85./month, \$363.40./6 months or \$520.00/year <i>(please indicate)</i>
TOTAL		\$

6. Permit Fee enclosed \$ _____
(Note: rate is subject to annual N.S. Consumer Price Index adjustment)

7. Proposed location of vending activities: _____

8. Development Permit obtained (if required): _____

9. List names, addresses and phone # of all sales persons who will also require Permits:

Name	Street Address	Phone #

10. Please attach to Mobile Canteen/Food applications:

- a Certificate of Insurance from your insurance company confirming your **\$1.0 Million** insurance coverage for public property liability and property damage
- a copy of your current Provincial Food Vendors Permit
- a copy of your current Food Handler's Certificate
- written authorization from the private property owner where you propose to locate (new locations only)

11. I/We, _____
(print your name/s)

hereby make application for a permit in accordance with the particulars as stated above, and declare that the above statements are true and correct and I/we undertake that if granted the permit applied for I/we will comply with all relevant Municipal, Provincial and Federal laws, regulation and By-laws, including the Town's Vending By-law a copy of which was provided to me.

SIGNATURE OF APPLICANT(S)

DATE OF APPLICATION

PLEASE NOTE:

1. It is an offence for any person to make a false statement in this application. Your permit may be revoked.
2. If you wish to operate on Town of Lunenburg public property you will first be required to obtain Town Council's approval.
3. Please return **in person** the completed application and applicable fees payable to the Town of Lunenburg: Bea Renton, CAO/Clerk of Licenses, Town of Lunenburg, 119 Cumberland Street, Lunenburg, Nova Scotia, B0J 2C0.

- FOR OFFICE USE ONLY -

DATE APPLICATION RECEIVED BY

LICENSE APPROVED

PERMIT #

LICENSE DENIED

BEA RENTON, CAO/CLERK OF LICENSES

DATE