



## Temporary Food Vendor Application

15 Sunapee Street

[www.newportnh.net](http://www.newportnh.net)

Telephone: 863-6278

Fax: 863-8008

Name of Property Owner \_\_\_\_\_ Tax Map \_\_\_\_\_ Lot \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street

Town

State

Zip

Physical Location in Newport \_\_\_\_\_ Zoning District \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street

Town

State

Zip

Hawkers/Peddler's Permit No. or Food Service License No. \_\_\_\_\_

*(Please attach a copy of permit or license)*

Have you contacted the School or Athletic League Official? \_\_\_\_\_

Will you take up any parking or sidewalk space? \_\_\_\_\_

How will you take care of your trash? \_\_\_\_\_

How long will the set-up remain on site? \_\_\_\_\_

Describe the EXACT location of the set-up (attach a plot plan if requested):

**I attest that all of the information provided on this permit application is true and accurate to the best of my knowledge. I also certify that I have read, and agree to the terms of the Food Vendors Policy on the back of this form.**

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Police Chief

\_\_\_\_\_  
Authorized Town Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date