

# Food Vendor License Application Form

## Vendor Information

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Business Name

Contact Person

Email Address

Phone Number

Business Address

## Food Operation Details

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Type of Food Sold

Type of Operation

Days/Hours of Operation

## Health & Safety

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List Current Permits/Licenses Held

Are all staff certified food handlers?

Describe Food Safety Measures in Place

## Supporting Documents

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Please attach copies of:

- Valid ID of owner/operator
- Proof of business registration
- Health permit(s)
- Food handler certifications

Upload Documents

Choose File

No file selected

☐ I hereby declare that the information provided is accurate and complete.

Submit Application