



Inspections Department

Building Official

PORT OF OPPORTUNITIES

2017 Blossomtime Application for Vendor License

Printed Name of Applicant _____ Type of Picture ID _____

Driver License Number _____ State Issued _____

Permanent Home Address _____ City _____

State _____ ZIP _____ Contact Phone _____ Date _____

Printed Name of Company Represented _____ City _____

State _____ Telephone _____ Email _____

Date of use for requested license: **May 6, 2017**

Length of time each day license is applicable: **7:00** a.m. to **5:00** p.m.

Brief (printed) description of nature of business or organization _____

Location where goods or property are proposed to be sold _____

Description of type of goods/products to be sold: _____

Vendor Type: Charitable /Veteran (provide proof) Stationary Moving

Proof of \$100,000.00 liability insurance with the City of Benton Harbor as a "named insured" or "additional insured" and a Berrien County Health Department Permit Receipt must be provided with application of food vendors who prepare or remove food from original manufacturer packaging. VENDORS ARE RESPONSIBLE TO PROVIDE THEIR OWN POWER AND WATER SOURCES.

Vendors may not block public streets or sidewalks. Vendors on private property must obtain written permission of property owner. Vendors are permitted in City Center Park ON PAVED AREAS ONLY. Vendors are allowed to vend from City owned parking lots.

I hereby certify that the above information is true and correct. I understand that any false statement will result in denial of the requested license and may impact ability to be licensed in the future.

Signature _____

PENALTY

\$150.00 to \$500 fine and/or up to 90 days in jail issued to any individual who is found guilty of vending or peddling without a license! Police personnel will require individual(s) to immediately cease all unlicensed activities.

APPLICATIONS AND FEES FOR REQUESTS MADE LATER THAN TEN (10) BUSINESS DAYS PRIOR TO VENDING DATE ARE SUBJECT TO THE FOLLOWING SURCHARGES:

<u>Received On</u>	<u>Surcharge</u>
4/24/2017	\$50
4/25/2017	\$100
4/26/2017	\$150
4/27/2017	\$200
4/28/2017	\$250
5/1/2017	\$300
5/2/2017	\$350
5/3/2017	\$400
5/4/2017	Not Accepted
5/5/2017	Not Accepted

These surcharges apply to ALL VENDORS, regardless of classification.

BLOSSOMTIME PARADE SPECIAL RATES:

HONORABLY DISCHARGED VETERAN *	FREE
CHARITABLE*	\$10.00
COMMERCIAL VENDOR	\$40.00

*Charitable and/or honorably discharged veteran vendors are eligible for a maximum of ten (10) no charge days per calendar year. Proof of charitable status and/or honorable discharge paper(s) must be provided with application.

Questions: 269-927-8418

Payment Center: 269-934-7638

FOR OFFICE USE ONLY

Insurance form received _____ Health Dept. License ____ Y ____ N ____ NA Copy of ID _____ Tax Owed Verify __ok

Information received and verified by _____ Date _____

Application Fee Paid \$ _____ CK# _____

Approval: _____

Building Official