

LISBON - ITINERANT VENDOR APPLICATION

License Fee: _____ \$25 Temporary Stands (90 days or less)
 _____ \$100 6-Months Permit
 _____ \$150 12-Month Permit
 _____ \$200 1-Week Mass Gathering (Carnivals & festivals) Permit
 _____ \$100 12-month outdoor Flea Market Permit
 _____ \$200 12-month indoor Flea Market Permit
 _____ \$ 0 Public Records Checks

Also Required: Landowner permission (submit letter if fixed location)
 If roaming, please submit a route map for the Police Chief to review

Fee Exemption: Lisbon Non-Profit School Groups or Charitable and Non-Profits Groups registered with the Secretary of State with IRS Code Section 501

Business Name: _____ Business Phone: _____

Business Location in town:_____

Business Email Address: _____

Business Mailing Address:_____

Owner's Name: _____

Home Phone: _____ Cell Phone: _____

Owner's Home Address (CSZ):_____

Residence(s) for last five years: _____

List Applicant / Partners / Corporate Officers (Names & DOB required):

Name: _____ | Name: _____ | Name: _____

Address: _____ | Address: _____ | Address: _____

Town/State: _____ | Town/State: _____ | Town/State: _____

Birthdate: _____ | Birthdate: _____ | Birth date: _____

Has applicant's business license ever been revoked: _____ If yes, why? _____

Has any applicant / partner / corporate officer ever been convicted of a felony? _____ If yes, describe specific circumstances_____

Does the establishment have a valid liquor license? _____ If yes, when does it expire? _____

I, _____ (owner's name), _____ (title) is authorized to sign on behalf of said business, and further declare that the forgoing information is accurate and true to the best of my knowledge and belief, and that the applicant does hereby acknowledge a public records check may be conducted.

Signature: _____ Date: _____

Business Name: _____

INSPECTION REQUIRED

☐ **Yes, if preparing food (includes making coffee)**
☐ **No, if prepackaged ice cream or food only**

Notice of Compliance (By Ordinance): I, **Nate LeClair, Health Officer** for the Town of Lisbon hereby certify I have inspected the above establishment and found the premises meet all requirements under the Lisbon Code and any applicable state regulations.

Signature: _____ Date: _____

COMPLETE TO HERE BEFORE FILING

For Office Use Only

☐ Public Records Check Completed.

Notice of Compliance (By Ordinance): I, **Ryan McGee, Police Chief** for the Town of Lisbon hereby certify I have reviewed this application and the vendor will not create safety problems for either traffic or pedestrians, and that information on file does not indicate the applicant is a person of bad moral character.

Signature: _____ Date: _____

INFORMATION

The Councilors are the Municipal Licensing Board. The first Itinerant Vendor application requires a public hearing, but renewals will not. Public records checks can take up to two or more weeks to process. Complete applications contain the CEO and Health Officer signatures. Councilors meet on the first and third Tuesdays of the month. Complete application and fees paid are required prior to the Council meeting. Meetings are held at the Town Hall at 7:00 PM in the conference room.

Temporary permits can be granted by the Town Clerk, after meeting all the requirements of the ordinance, for no longer than 90 days.

SUGGESTED CONTACTS:

353-3000 Ext 112... Town Clerk
353-3007..... Town Office Fax
353-3000 Ext 111... Code Enforcement Officer
353-2500..... Police Department
333-6601 Ext 1154..Health Officer
287-5671..... State Health Inspection Dept.

624-9693State Sales Tax Division
624-7736.....Bureau of Corporations
624-7220.....Bureau of Alcohol Beverages
287-3841.....Agriculture Dept– Bakery Licenses
624-6550.....Marine Resources
1-800-872-3838..Business Answers