



VENDOR PERMIT APPLICATION

APPLICATION DETAILS

CHECK ONE: ANNUAL LICENSE - \$50.00 (MAY 1 – APR 30)

EVENT (\$5/DAY UP TO 3 DAYS) EVENT DATES: _____

BUSINESS NAME: _____ APPLICANT NAME: _____

BUSINESS ADDRESS: _____

PHONE: _____ EMAIL: _____

DATE OF BIRTH: _____ DRIVER'S LICENSE/ID #: _____

WI SELLER'S PERMIT #: _____

TO INCLUDE WITH YOUR APPLICATION:

- Proof of Commercial General Liability Insurance with a minimum \$300,000 in the aggregate naming the City, its employees and agents as additional insured
- A valid copy of your Wisconsin Sellers Permit from the WI Dept of Revenue

DESCRIBE THE FOOD, GOODS OR SERVICES TO OFFERED FOR SALE & THE PRIMARY LOCATION OF SAID SERVICES:

Applicant agrees to provide the above stated documents and understands Chapter 12.13 of the Dodgeville Municipal Code that governs 'Vending on City Property' in the City of Dodgeville and agrees to comply with those regulations.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Proof of Insurance Provided: YES NO

Police Review: YES NO

Public Works Review: YES NO

Issue Date: _____

PERMIT #: _____