

CITY OF TAUNTON

FAMILY 4TH NIGHT FOOD VENDOR APPLICATION

Thomas C. Hoye, Jr.
Mayor
Alyssa Haggerty
Chief of Staff
Gill Enos
Budget Director



Temporary City Offices
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Taunton, MA 02780
Tel. (508) 821-1000
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FOR OFFICE USE ONLY – 2016 END OF SUMMER FESTIVAL

Date Applied: _____ Date Approved: _____ Date Issued: _____

Paid Donation: _____ MA H&P : _____ Certificate of Liability Ins.: _____

FAMILY 4TH NIGHT FOOD VENDORS MUST SUBMIT A FOOD VENDOR APPLICATION, COPY OF CERTIFICATE OF LIABILITY INSURANCE, COPY OF MA HAWKERS AND PEDDLERS LICENSE, AND A \$100 CASH OR CHECK NON-REFUNDABLE DONATION (TO BE USED TOWARDS THE COST OF THE EVENT) MADE OUT TO THE MAYOR'S WORTHY CAUSE BY MONDAY - AUGUST 1, 2016.

FOOD VENDOR APPLICATION

PLEASE PRINT CLEARLY

Food Stand, Food Truck or Business Name: _____

Type of Cuisine: _____

Owner Name: _____

Owner Email: _____

Owner Phone Number: _____

Address: _____

City: _____ **State:** _____ **ZIP:** _____

Contact for day of Event Name (if different than contact listed above):

Name: _____

Cell Phone Number: _____

Estimated Time of Arrival at Event: _____

Menu

Please provide us with a few items you plan to serve, with prices, for event planning purposes.

Item:	Selling Price:
1.	
2.	
3.	
4.	

Please indicate what type of unit your business is (i.e. food truck, stand, trailer, etc.), how much space you require and total electrical requirement (please specify amps and 110 or 220 volts):

Please list major electrical appliances, listing those with the heaviest amounts of electricity first. If information is available please note their ampage required, and whether they operate at 110 or 220 volts. (Don't forget air conditioners, warming lamps, etc.)

Are there any other special requirements which you need in order to operate at this event?