



4800 SOUTH SERVICE ROAD  
BEAMSVILLE ON L3J 1L3  
TEL: (905) 563-8205  
FAX: (905) 563-6566

**FOOD AND REFRESHMENT VENDOR  
SPECIAL EVENT PERMIT APPLICATION**

Food and Refreshment Vendor Special Event Permit Applications must be submitted to the Planning and Development Department a minimum of 30 days prior to the start of the event.

**Vendor information**

Vendor/Contact Name:	
Name of Business/Vendor Unit:	
Legal Name (Corporation Name/Number):	
Owner's Address:	
Business Phone #:	Cell Phone #:
Email Address:	
Contact information for person in charge on day of event:	

**Event Information**

Preferred Event Location(s):
Date(s) Vendor would like to participate: (please indicate all dates of interest from June - October 2022)

Type of Food and Refreshment Vending: <input type="checkbox"/> Class A (Motorized Food Sales) <input type="checkbox"/> Class B (Non-motorized Food Sales)
Proposed Hours of Operation: (Note – parks are open from 10:00am – 10:00pm)

**Proposed Food Menu**

Food Item(s) Offered to the Public:
Type of Fare Accepted:

**Vehicle Information (if applicable)**

MTO Ontario Plate #:		
Year:	Make:	Model:

Please review the attached Special Event Checklist provided to ensure your application is complete.

## FOOD AND REFRESHMENT VENDOR SPECIAL EVENT AGREEMENT

I have read the terms and conditions as outlined and have fully disclosed all details and components of the proposed event and agree to the terms as outlined. I will abide by all conditions and regulations contained in the Town's Special Event Guidelines and the applicable policies, procedures and responsibilities outlined. I am aware that failure to comply as outlined could lead to cancellation of event approval at any time.

Applicant's Signature

Date

Owner's Authorization

Date

\*The digital printed signature is accepted as a signed document

The personal information on this form is collected under authority of the Municipal Act 2001, SO 2001, c.25, as amended. The information will be used for processing Special Event Permit Applications and will form part of a public record to be considered by Council in processing the application. Questions about this collection should be directed to the Corporate Services Department.

## APPLICATION CHECKLIST

Where applicable, copies of the following must be submitted to the Town. Please attempt to submit as much of the documentation as possible with the application. Final approval will not be given until all (applicable) documentation has been submitted.

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| Completed Special Event Permit Application Form and Fee  | <input type="checkbox"/>                             |
| Detailed Site Plan   | <input type="checkbox"/>                             |
| Schedule of Dates and Locations Requested  | <input type="checkbox"/>                             |
| Food Vendor Permit (Public Health)   | <input type="checkbox"/>                             |
| Insurance Certificate: minimum \$2,000,000 of general liability coverage<br>Naming the Town as an additional insured | <input type="checkbox"/><br><input type="checkbox"/> |
| Waste Management Plan  | <input type="checkbox"/>                             |
| Details of any Day-of Signage  | <input type="checkbox"/>                             |
| Field Approval from the TSSA   | <input type="checkbox"/>                             |
| The full amount of any outstanding amounts owed to the Town as a result of<br>a previously permitted Special Event   |  |