

INSTRUCTIONS TO VENDOR PERMIT APPLICANTS

All applicants will need:

- Two (2) 1" X 1" color photos (passport size)
- Liability Insurance
 - \$75,000 for general vending
 - \$300,000 for vending when using a motor vehicle
- Connecticut State Tax ID Number
 - To obtain a tax ID number call (203) 336-7890
- If you are vending food of any kind, a Health License must be obtained
 - To obtain a Health License call (203) 576-8250
- If any flammable substance is used during vending, an inspection from the Fire Department is required. They are located at City Hall, 45 Lyon Terrace, Room 211
 - To obtain a fire inspection call (203) 576-8013
- Each vendor must complete the "Hold the City of Bridgeport Harmless" form. This form must be notarized if the applicant does not come into the Permits Office and apply in person.
- If you are using a motor vehicle while vending, you must provide all registration and vehicle insurance information.
- The application must be completed fully, including merchandise to be sold.
- If there are assistants, they must complete the assistant form in full, including a "Hold the City of Bridgeport Harmless" form. There is a four (4) assistant limit.
- The prices for vending are as follows:
 - \$65 Three (3) Month
 - \$75 Three (3) Day Special Event
 - \$125 Six (6) Month
 - \$35 Assistant Vendor***

Assistant vendor must be working with original vendor at all times
TOTAL FEE SHALL NOT EXCEED \$250

PLEASE ALLOW ONE (1) WEEK PROCESSING TIME ON ALL PERMITS



BRIDGEPORT POLICE DEPARTMENT

VENDOR PERMIT APPLICATION



Name: _____

Address: _____

City/State: _____ Zip Code: _____

Date of Birth: _____

Telephone: _____

Social Security: _____

Full Name of Business: _____

Type of merchandise to be sold: _____

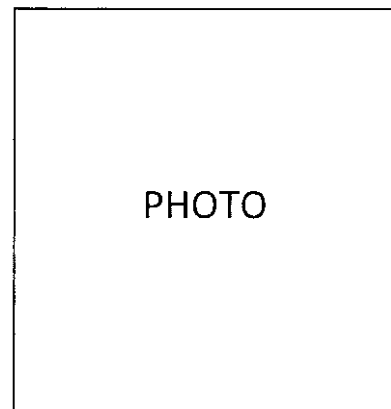
State of Connecticut Tax ID Number: _____

Name of Insurance Company: _____

Policy Number: _____

Is a motor vehicle used in vending? Yes _____ No _____

Signature: _____ Date: _____



PERMIT #: _____

DATE ISSUED: _____

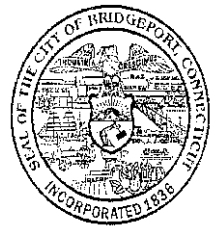
TYPE OF EVENT: (check one) SPECIAL EVENT _____ SEMI-ANNUAL _____

VALID FROM: _____ TO _____

FEE COLLECTED: _____

CITY OF BRIDGEPORT
PERMITS & LICENSING DIVISION

300 CONGRESS STREET
BRIDGEPORT, CONNECTICUT 06604
(203) 581-5263



The undersigned, who has applied for a Vendor's License, either as a principal or agent, agrees to indemnify and hold harmless the City of Bridgeport and its officers, employees, agents, and assignees from any and all claims, actions, injuries and damages of any kind and description that may accrue to or be suffered by any person by reason of or related to vending of goods, wares, merchandise or food by said applicant or the granting of a license to do so.

APPLICANT'S NAME

APPLICANT'S SIGNATURE

DATE

WITNESS