

## Vendor Application

### Contact Information

Vendor/Business Name: \_\_\_\_\_

Contact Person Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### Social Media Links

Facebook: \_\_\_\_\_

X (formerly Twitter): \_\_\_\_\_

Instagram: \_\_\_\_\_

Website: \_\_\_\_\_

### Dates

Select the Requested Market Dates:

- Jigs & Wheels festival
- Colours of Corner Brook
- Cruise outdoor markets

Please indicate the cruise market dates you would like to book, if applicable:

\_\_\_\_\_  
\_\_\_\_\_

**Product Description**

What categories best describes your product/service?

- |   |                                      |  |
|---|--------------------------------------|--|
| <input type="checkbox"/> Baked Goods                  | <input type="checkbox"/> Crafts      | <input type="checkbox"/> Plants          |
| <input type="checkbox"/> Baked Goods (specialty)      | <input type="checkbox"/> Farmer      | <input type="checkbox"/> Prepared Foods  |
| <input type="checkbox"/> Books                        | <input type="checkbox"/> Jewelry     | <input type="checkbox"/> Preserves       |
| <input type="checkbox"/> Carnival                     | <input type="checkbox"/> Meats       | <input type="checkbox"/> Specialty Foods |
| <input type="checkbox"/> Rides/Games & Bouncy Castles | <input type="checkbox"/> Music       | <input type="checkbox"/> Specialty Item  |
| <input type="checkbox"/> Clothing                     | <input type="checkbox"/> Non-Profit  | <input type="checkbox"/> Other: _____    |
|   | <input type="checkbox"/> Paintings   |  |
|   | <input type="checkbox"/> Photography |  |

Please include a detailed list of ALL products you wish to sell:

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Have you been a vendor at a City event/cruise market before?

- Yes  
 No

Do you currently hold a registered Mobile Vendor Permit?

- Yes  
 No

If so, please provide the permit number: \_\_\_\_\_

Note: Vendors who sell food products at any markets in Newfoundland and Labrador are required by the Province to hold a **Seasonal Food Establishment License**.

If you will be selling food products, do you currently hold a Seasonal Food Establishment License?

- Yes
- No
- I don't sell food products

Food License Application:

[https://www.servicenl.gov.nl.ca/forms/pdf/app\\_food\\_tobacco\\_lic.pdf](https://www.servicenl.gov.nl.ca/forms/pdf/app_food_tobacco_lic.pdf)

#### Consent

- I agree to abide by any policies and regulations outlined by the City of Corner Brook in accordance with provincial and municipal regulations.
- Please include me in promotions or social media posts.

#### Consent

- I agree to the privacy policy stated below.

The City of Corner Brook uses this form to collect your information in order to better administer programs and services that citizens use and rely on. The City of Corner Brook committed to protecting the privacy of individuals who chose to utilize these services.

This information is collected in compliance with the Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015) and will only be used by authorized staff to fulfill the purpose for which it was originally collected, or for a use consistent with that purpose unless you expressly consent otherwise. This information is not disclosed to other public bodies or individuals except as authorized by ATIPPA, 2015.

Signature of Vendor:

Date:

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