



Please complete the application, sign, and return to:

Treasurer, Town of Abingdon
tbaldwin@abingdon-va.gov
133 West Main Street, P.O. Box 789
Abingdon, VA 24212-0789

*This application is hereby made for a permit under Chapter 18, §18-130, et. Seq. Code of the
Town of Abingdon, Virginia*

APPLICATION FOR PEDDLERS, VENDOTS, AND CANVASSERS PERMIT

Please submit completed applications as incomplete information will result in delays.

| Applicant Information | |
|---|--|
| Name of Business: | Applicant/Owner Name(s): Aliases, Maiden Name, Nickname(s): |
| Mailing Address: | City/Town: State: Zip: |
| Email Address: | |
| Business Phone: | Cell Phone: |
| Virginia State Corporation Commission Entity ID: | Taxpayer Identification No.: |
| Registered Agent Information | |
| Registered Agent (if applicable): | Address: |

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| Authorized Representative Information | |
| Name of Authorized Representative: | Address: |
| Business Phone: | Cell Phone: |
| Specific Location of Operation Information | |
| Specific Location of Operation within Town Limits: <ul style="list-style-type: none"> ➤ Applicants may only be located on commercially zoned property. Call the Community Development Dept. with any questions – (276) 628-3167 ➤ Special exceptions for locating in areas that are not commercially zoned may be approved on a case-by-case basis by the Town Manager or their designee. | NOTE: Permits are not transferrable to any other vehicle. The granting of a permit does not give the holder the explicit right to vent on Town parcels or at Town events. Vending at Town events or Town parcels still must be coordinated with the appropriate Town departments. |
| Operating: Year-Round – Seasonal – | Operating Month(s): |
| Operating Location(s): | Days/Hours of Operation within Town Limits: |
| Mobile Food Unit Information | |
| Mobile food unit is a food establishment mounted on wheels, readily moveable from place to place at all times during operation and shall include, but not limited to, pushcarts, trailers, trucks or vans. The unit, all operations, and all equipment must be integral to and be within or attached to the unit. Does your mobile unit meet this definition? | |

| | |
|---|--|
| Mobile Food Unit Information: (Year, Make, Model, Color) | |
| License Plate, State and Expiration Date: | |
| VIN #: | |
| Owner's Name: (Last, First Middle) | |
| Description of Goods/Services to be sold: | |
| Where are the Goods/Products/Services manufactured, produced, and/or stored? | |
| Can your information be shared as an Abingdon approved food truck vendor? | |

Information needed to complete your application:

- Valid Driver's License for each person who will drive the food truck (Provide Copy)
- Current Vehicle(s) Insurance Card (Provide Copy)
- Current Vehicle Registration Card (Provide Copy)
- Valid permit for the Virginia Department of Health stating that the food truck meets all applicable standards. A Valid permit must be maintained for the duration of the permit. (Provide Copy)
- Valid inspection from the Fire Marshal stating the food truck meets the requirements of the Virginia Statewide Fire Prevention Code and all applicable standards. The food truck must be re-inspected on an annual basis. (Provide Copy)
- All applicable federal, state and local licenses/permits associated with the business. (Provide Copy)
- Proof of Insurance, including mobile food service policy and liability. (Provide Copy)
- Two (2) wallet size photos of all authorized operators of the business.
- Typed names and addresses of all food truck personnel and copies of current food handler's permits issued to personnel. (Provide Yearly)
- Photo of truck, cart, signs, umbrellas and/or canopies with dimensions of each written on the back of each photo.
- \$10.00 background investigation fee (Checks payable to 'Town of Abingdon')
- Applicants must be located on private property with the property owner's written permission. Copies of the permission may be requested for inspection by any authorized Town of Abingdon personnel.

License Classification/Gross Receipts

License Classification:

Gross Receipts:

License Fee:

Total Fee:

Under penalty of perjury, I/we do hereby swear of affirm that the amount reported as gross receipts from our business reported herein is true and correct.

Applicant's Signature

Date

FOR OFFICE USE ONLY

| | | | |
|-------------------------|----------------------------------|---------------------------------|------------------------------------|
| License Classification: | <input type="checkbox"/> Peddler | <input type="checkbox"/> Vendor | <input type="checkbox"/> Canvasser |
| Received by: | | | |
| Date: | | | |
| Acct. No.: | | | |
| Ticket No.: | | | |

| | |
|-------------------|--|
| Total Fee: | |
| Adjustment: | |
| Penalty (10%) | |
| Interest (10%) | |
| Total Due: | |