



Jackson Pride Week Food Truck Vendor Form

Business Name _____

Applicant's Name _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Contact E-mail _____ Website _____

What percentage of your food products are made with locally produced ingredients?
(0%) (1-25%) (26-50%) (51-75%) (76-100%)

Type of business: Sole Proprietorship Total years of operation _____

Assumed Name Total years of operation _____

Partnership Total years of operation _____

Limited Liability Company Total years of operation _____

Corporation Total years of operation _____

Cooperative Total years of operation _____

Non-Profit Organization Total years of operation _____

Other (specify) Total years of operation _____

List below the license and inspection numbers required for the operation of your business and/or sale of your products, and any other license, registration, certification, or permit required by local, state, or federal law. Provide copies of all valid & required licenses, registrations, certifications, or permits with your application packet.

Michigan sales tax license number _____

STFU License Number _____

Mobile Food Establishment Food Service License Number _____

Other relevant license numbers _____

Mail to: Jackson Pride Center
c/o Jackson Pride Festival Committee
P.O. Box 4086
Jackson, MI 49204-4086

Please list the names and contact information for all owners, partners and other persons involved with your business. List any other staff who will actively participate with your business at the event. Include names, phone, and email:

Please provide 2 references below (Immediate family members, business partners & employees NOT allowed) Name, relationship, phone, and email

Special Requirements/Space Requirements: Please list any special requirements for your food truck below. ie: What is the approximate length/size of your truck or cart? Power Needed? Water Needed:

Property Information: List ALL addresses where items sold from your truck are produced, created, or stored for the purpose of selling at the Jackson Pride Festival. Please attach additional pages as needed.

Property 1 Property Owner

Name: _____

Address: _____ City: _____ State: _____

Zip code: _____ What months of the year is this property used? _____

Total Kitchen/Workshop Square Footage: _____

Production on this property (Check all that apply): Value-added foods Prepared Foods Other (please specify) _____

Property Use (Check all that apply): Food Preparation Packaging Cooking/Baking Storage Other (please specify) _____

Storage Please explain product storage methods on this property (refrigeration, dry storage, other cold storage, etc.): _____

Property 2 Property Owner

Name: _____

Address: _____ City: _____ State: _____

Zip code: _____ What months of the year is this property used? _____

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Total Kitchen/Workshop Square Footage: _____ Production on this property (Check all that apply): Value-added foods Prepared Foods Other (please specify) _____

Property Use (Check all that apply): Food Preparation Packaging Cooking/Baking Storage Other (please specify) _____
Storage Please explain product storage methods on this property (refrigeration, dry storage, other cold storage, etc.): _____

Product List & Menu: Please provide a complete product list, including a list of ingredients for each product, and copy of your menu with this application. Please identify which ingredients are produced/purchased locally in each product. Any products NOT submitted in writing with this application are not allowed to be sold without prior submission of an application update form and approval of the market manager. Photos: Please attach at least 1 photo of your truck/cart/display or at least 1 photo of your products to this application.

Vendor's Affidavit • I/We _____ certify that I/ We am/are a Mobile Food Vendor, and I/ We intend to offer for sale and sell only articles of my/our own production while occupying the Market. • I/We understand that the Jackson Pride Festival may request additional information to verify this Application, any amendments to this Application, as well as compliance with the Jackson Pride Festival Rules, at any time, and I/We agree to provide such information within a reasonable time as determined by the Jackson Pride Festival. • I/We understand that I/we am/are entitled to sell or offer for sale only such items that have been described on this Application filed with the Jackson Pride Festival. • I/We understand and agree that I/we am/are prohibited from supplementing my/our own products with any other products that are partially or totally produced by anyone else. • I/We have read and understand Jackson Pride Festival Rules in effect as of this date and agree to comply with them. • I/We further swear that all information provided to the Jackson Pride Festival in or along with this Application by me/us on my/our behalf is complete and correct. • I/We understand and agree that violation or falsification of any of the terms of this affidavit will result in immediate and permanent loss of permission to sell any product at the Jackson Pride Festival. • If signing for a business or cooperative, the individual(s) signing this Application and Affidavit have the requisite authority to do so.

Signature of Applicant (s): _____

Or Authorized Agent for Applicant(s): _____

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