

City of Johnstown Street Vendor Registration Form

Welcome to the City of Johnstown. The City takes the health and welfare of our residents and visitors very seriously. The issuance of a Street Vendor License insures the safety and quality of the food and/or beverages provided and the individuals providing the services. Providing said services, for profit or non-profit, in the City of Johnstown is illegal without appropriate licenses. All licenses are specific to one (1) stand and/or owner, and are limited to one (1) trailer or one (1) cart. In addition to the guidelines on your specific application, please note the following in regards:

- A \$100.00 late fee is applied to anyone not submitting an application at least seven (7) working days before the start date on the Registration Form.
- All Annual Street Vendor Licenses expire on December 31st of the current year and are not pro-rated. Monthly Street Vendor Licenses are valid for thirty (30) calendar days.
- Street Vendor Licenses are not transferable and are non-refundable.
- All licenses are subject to suspension and/or revocation for failure to follow all local, state, and/or federal laws and guidelines.
- You are permitted to operate within zoned business corridors. You are required to maintain a five (5) foot pedestrian right-of-way at all times and keep a clean and litter-free area around your stand/cart.
- You are required to maintain a 15' minimum distance from the entrance of a business, and a minimum distance of 50' from another vendor and/or business with similar trade (i.e. hot dog cart in proximity of a restaurant).
- Vendors are required to display, list, or tag the pricing(s) for all food, beverages, and/or merchandise provided. Failure to provide said pricing(s) is subject to the suspension and/or revocation of license.
- All equipment must meet the standards for Mobile Food Facilities as regulated by the PA Department of Agriculture.
- All stands are required to have potable water, the ability to warm water for utensil washing, soap & towels for hand washing, a certificated fire extinguisher, and an approved sanitizing solution.
- Appropriately equipped heating and refrigeration units capable of holding hot foods at or over 135°F and cold foods at or below 41°F.

Please provide the following information/attachments along with the completed registration form:

- Completed registration form and check for applicable license fee(s).
- A copy of PA Food Employee certification card for supervising staff person.
- Proof of location approval (lease agreements, letter, etc.)
- A detailed listing of proposed foods and/or menu

Please review the enclosure, provide all applicable information and return with appropriate payment. You will be notified within 5 - 10 business days of submission of the status of your application. Feel free to contact the City at 814.533.2017 with any questions or concerns you may have.

Return completed registration form with payment and applicable attachments to:

City of Johnstown 401 Main Street, Room 200 Johnstown, PA 15901



Title

City of Johnstown Street Vendor Registration Form

A Street Vendor License is required for all on-street food, beverage, and/or merchandise vendors/stands in the City of Johnstown. All licenses are specific to one (1) stand and/or owner, and are limited to one (1) trailer or one (1) cart. You are required to have a license for each stand, whether side-by-side or separate. Each stand must have a valid license on display.

1. Vendor Set-Up Inf	ormation				
Location(s):	ocation(s): Date(s):				
2. General Informati	on				
Business Name:					
Soc. Sec. # or Federal ID #: Mercantile Tax ID #:					
Business Address:					
Mailing Address (if diff	ferent than above):				
Business Phone:	Cell Phone	2:	Fax:		
Type of Organization:	Sole Proprietorship	<u>Partnership</u>	Corpor	ation	
	<u>Association</u>	<u>Fiduciary</u>	*Date I	*Date Incorporated:	
Nature of Business:	Food/Beverage Retail	<u>Service</u>	*State:		
Owner's Name:					
Owner's Address (if di	fferent than above):				
Owner's Phone: Cell Phone:			E-Mail:		
3. Name of Person N	Managing Event				
Name:					
Address:					
Soc. Sec. #	D.O.B				
Weight:	Height: Ey	ve Color:	Male	Female	
Have you ever been co	onvicted of a felony and/or mi	isdemeanor? No	Yes		
If yes, explain:					
4. License Fees:	Daily License: Number of Days: X \$20.00 per day Monthly License**: \$100.00		ay = \$	= \$ Amount Due	
	•	all applicable requirement	ts and monthly	renewal(s)**	
	Annual License: \$500.00				
-	ers to be made payable to: Ci on Credit Card, an invoice will	-	ddress provided	above within 48 hours	
l,	, V€	erify that the statements r	made in the fore	egoing application are tru	
and correct and to the	e best of my knowledge, infor alties of 18PA C.S. 4906 relati	rmation, and belief. I und	erstand that fals	se statements herein mad	
Jame & Title: Date:			e:		
Return completed Reg	sistration Form with payment	and applicable attachment	401 N	of Johnstown Main Street, Room 200	
			Johns	stown, PA 15901	
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