

SIDEWALK VENDOR APPLICATION SUPPLEMENT

***ATTACH THIS FORM TO YOUR SPECIAL BUSINESS PERMIT APPLICATION**

| Section One: Business Information | | |
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| COMPANY/APPLICANT NAME: | | |
| Section Two: Cart Information | | |
| DESCRIPTION OF CART: | SIZE OF CART(LxWxH): | |
| SELLING FOOD: <input type="checkbox"/> YES <input type="checkbox"/> NO | SAC CO HEALTH CERT # (FOOD ONLY): | *CERT ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO |
| DESCRIPTION OF ITEMS SOLD: | | |
| Section Three: Operation Information | | |
| <input type="checkbox"/> ROAMING <input type="checkbox"/> STATIONARY <input type="checkbox"/> TEMPORARY LOCATION | | |
| DAYS/HOURS OF PLANNED OPERATION: | | |
| LATE NIGHT VENDING (10 PM-2:30 AM): <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| *you may not operate late night within 600 feet of a permitted entertainment venue or liquor store | | |
| STATIONARY VENDING APPLICANTS ONLY: | | |
| VENDING ADDRESS (OR NEAREST ADDRESS): | | |
| LOCATION DESCRIPTION (e.g., corner, in front of address): | | |
| PUBLIC PARK: <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| TOTAL WIDTH OF SIDEWALK/PATH: | SIDEWALK REMAINING WITH CART PRESENT: | |
| *all stationary permit applications must be accompanied by a photo or drawing of the vending site and where the cart will be located during vending hours. | | |
| Section Four: Acknowledgment of Rules and Regulation (initial) | | |
| | I am familiar with Sacramento City Code Chapter 5.90 regulating Sidewalk Vending | |
| | I have obtained insurance in accordance with Chapter 5.90 | |
| | I understand if a permitted special event of outdoor market occurs within 300 feet of my vending location, I will be unable to operate during the event hours | |
| | I understand that I cannot vend within 600 feet of a permitted entertainment venue (e.g., nightclub) or liquor store during the hours of 10 p.m. and 2:30 a.m. | |
| | I am familiar with the ordinances of the City and the laws of the State of California pertaining to this application | |

| Section Five: Demographic Information (optional) | |
|--|---|
| What gender do you identify with? <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other _____ | Which category includes your age? <input type="checkbox"/> 18-20 <input type="checkbox"/> 21-29 <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60+ |
| What ethnicity do you identify with? <input type="checkbox"/> Asian/Asian Indian <input type="checkbox"/> Black/African-American <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Hispanic/Latinx | <input type="checkbox"/> Middle Eastern/North African <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other: _____ |
| What is the highest level of education you have completed? <input type="checkbox"/> Some High School <input type="checkbox"/> Graduate Degree <input type="checkbox"/> High School Diploma <input type="checkbox"/> Trade School <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Other: _____ | |
| Section Seven: Agreement and Signature | |
| I hereby certify that the answers I have given are true and correct to the best of my knowledge and belief, and I understand and agree that any false or misleading answer will result in denial or revocation of any permit. Further, the City is hereby authorized to seek and verify information contained in this application. I understand verification of the accuracy of the application information is a matter of public record and may be made available to interested parties upon request. | |
| Applicant Signature: <div style="border: 1px solid black; height: 40px; width: 100%;"></div> | Date: <div style="border: 1px solid black; height: 40px; width: 100%;"></div> |