CITY OF LACONIA
APPLICATION FOR ITINERANT VENDOR'S LICENSE

(PLEASE PRINT OR TYPE)

Business Name: Winni Wagon

Business Address: [redacted]

Applicant's Name: Janine Geddis Telephone # [redacted]

Applicant's Address: [redacted]
Number Street City State Zip

Non Profit ID #(if applicable)_____

E-mail Address: Winniwagon@gmail.com

Merchandise to be sold: food: sandwiches, cheese steak, hotdogs, burgers, hats, t-shirts

Do you have a State of NH hawkers/peddlers license? X Yes ____No (copy of license attached)

Do you have a State of NH Department of Health permit? X Yes ____ No (copy of permit attached)
(Food vendors only)

Do you have the property owner's permission? X Yes____ No (written permission attached)

* Down stairs has Ace's permission form *

The dates, days and hours you will be open for business:

Date: Thurs. Hours of Operation - From: 11am To: 2 pm
Date: Mon's Hours of Operation - From: 11am To: 2pm
Date: Tues Hours of Operation - From: 7am To: 10am
Date:_____ Hours of Operation - From:_____ To:_____

Where do you intend to vend? Ace Hardware / Irwin Hyundai
(Street location)

(FOR CITY USE ONLY)

Application Fee: _____ Received on (date): _____ by: _____

Planning/Zoning suggestions/Comments

Initials_____

Licensing Board Approval on: _____ License Valid on:_____

Special Conditions of Approval: _____per 161.20 of City's Licensing Ordinance _____

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