-2 _:	Town of Happy Va				VENDOR PERMIT APPLICATIC Revised: November 2
ABRADOR	212 Hamilton River P.O. Box 40 Station Phone: (709) 896-33 muntech@townhvg	B, HV-GB AOP 1E0 321	OFFICE ONLY: Approved: Not Approved:		PERMIT #: V- Date Received:
Section 1: Contact N	Applicant and Conta ame	ct Information		Business Name	(if applicable):
Email:				Phone #(s):	
Mailing ac	ldress:				
Town:			Province:		Postal Code:
·	on of Goods to be Sol	d:			
·	on of Goods to be Sol Location(s):	d:			
Proposed					Number of Units:
Proposed	Location(s):	/Vehicle/Table):			Number of Units:
Proposed	Location(s): on of Unit (e.g. Stand/ blishment License (if	/Vehicle/Table):			Number of Units:
Proposed Descriptio Food Esta Type of Pe	Location(s): on of Unit (e.g. Stand/ blishment License (if	[/] Vehicle/Table): required):	per stand)	t erly (3-month) (\$125 p	

I,of	in the Province of Newfoundland & Labrador, do solemnly
declare that the plans, specification and statements herein c	ontained in the said application are true and conform to the
best of my belief to the requirements of the Regulations of t	he Town of Happy Valley-Goose Bay with full knowledge of the
circumstances connected with same, and that the above Reg	ulations will be complied with in the development whether
specified herein or not. I make this solemn declaration, cons	cientiously believing it to be true and knowing that is of the
force and effect as if made under oath.	

Applicant signature:	Date:
Property Owner signature (if required):	Date:

This information is being collected to assist the municipality in identifying and addressing problems observed by residents. The information is collected under the authority of section 61(c) of the Access to Information and Protection of Privacy Act, 2015. If you have any questions about the collection, use and disclosure of your information, please contact Nadine MacAulay at <u>cao@townhvgb.com</u>.