

SEASONAL VENDOR PERMIT APPLICATION

2828 Sheridan Road, Zion, IL 60099 847-746-4012 - FAX 847-746-7167 www.cityofzion.com

FEE:\$50.00 (Permit is good for a maximum of 6 months) All permit fees are non-refundable. (not applicable for not-for-profit organizations) All applicants shall file with the City Clerk, a Certificate of Insurance running to the City in the amount of \$1,000 executed by the applicant, as principal.	
Address:	
Contact No.:	Vendor State Tax ID No.:
Sales Location:	I
Length of time of sales:	
trees, holiday merchandise, seasonal fresh f business.	ng permission to sell seasonal items, including but not inclusive of, Christmas od items, on property other than at his own locally established place of N PRIVATE PROPERTY REQUIRES OWNER APPROVAL
Property Owner Name:	
Contact No.:	Fax:
Property Owner Signature:	
and hereby agrees to abide by the Ordin properly designated officials at any reas	
	rovided in this application is true and correct to the best of my knowledge ling information. I understand the failure to supply adequate or correct ermission to hold such a permit.
Applicant Signature	Date
Print Applicant's Name	
_	(For Office Use Only)
Date:	Permit No.:
Receipt No.: Total Amount Paid:	