



CITY OF SALINAS

DEVELOPMENT ENGINEERING, A division of the Public Works Department
65 West Alisal Street | Salinas, CA 93901 | 831-758-7251 | www.ci.salinas.ca.us

Sticker No.

Street Vendor Permit Application

APPLICANT INFORMATION

Applicant's Name: _____

Phone: _____ Cell: _____ E-mail: _____

Applicant's Address: _____
(City) (State) (Zip Code)

Cart Dimensions: _____ Permit License#: _____
(Length/Width/Height)

BUSINESS OWNER INFORMATION

Business Name: _____ Business License#: _____

Business Address: _____
(City) (State) (Zip Code)

Business Owner Name: _____

Phone: _____ Cell: _____ E-mail: _____

REQUIRED DOCUMENTS (Attach to this application)

Required of all applications:

- Completed Vendor Permit Application form and filing fee \$ _____
- Current City of Salinas Business License
- Home Occupational Permit, if required
- Employees must be present and shall provide a photo I.D. Vendor I.D.s are not an acceptable photo I.D.
- Color photographs of the cart (4-sides)

I shall hold the City of Salinas, its officers, agents and employees, and the adjacent property owner free and harmless from any claims for damages to persons or property including legal fees and costs of defending any actions or suits thereon, including any appeals therefrom, which may result from the granting of this permit.

Applicant Name (Print): _____

Applicant Signature: _____ Date: _____

Business Owner Signature: _____ Date: _____
(if different from Applicant)