

Department of Parks and Recreation  
214 N. Hogan St, Ste. 100  
Jacksonville, FL 32202

**Park Vendor Application - \$10.00 FEE REQUIRED**

Pursuant to Chapter 667, Ordinance Code, Application is hereby made for a Park Vendor Permit

Application Date: \_\_\_\_\_

ORGANIZATION NAME: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

TYPES OF PRODUCTS TO

BE SOLD OR EXHIBITED: \_\_\_\_\_

APPLICATION IS TO:	<input type="checkbox"/>	SELL PREPARED FOOD
	<input type="checkbox"/>	SELL NON-HANDMADE GOODS
	<input type="checkbox"/>	SELL HANDMADE (BY EXHIBITOR) CRAFTS
	<input type="checkbox"/>	SOLICITATION OF FUNDS THROUGH PERFORMING ARTS
	<input type="checkbox"/>	DISTRIBUTION OF FOOD OR GOODS

**THE FOLLOWING MUST BE PROVIDED PRIOR TO ISSUANCE OF PARK VENDOR REGISTRATION**

<input type="checkbox"/>	OCCUPATIONAL, PEDDLERS OR RESALE LICENSE	Expires	_____
<input type="checkbox"/>	HEALTH PERMIT (FOOD VENDORS ONLY)	Expires	_____
<input type="checkbox"/>	VENDOR PERMIT	Expires	_____
<input type="checkbox"/>	CERTIFICATE OF INSURANCE (see attached for requirements)	Expires	_____

This application is made under the penalties of **Section 837.06 Florida Statutes**, and the provisions of **Section 667.104, Ordinance Code**. The giving of false or misleading information is grounds for suspension or revocation of the registration.

\_\_\_\_\_  
Authorized Vendor Representative Signature

Office Use Only

APPROVED \_\_\_\_\_

DENIED \_\_\_\_\_

DATE: \_\_\_\_\_

PARK VENDOR REGISTRATION NO. \_\_\_\_\_

\_\_\_\_\_  
Department of Parks and Recreation Signature

Check/Money Order payable to the Tax Collector can be made in the office or mailed to the address below:  
**COJ Parks & Recreation - 214 N. Hogan St. 1st Floor Ste. 100 - Jacksonville, FL 32202**