

**APPLICATION FOR FOOD VENDOR LICENSE**  
PURSUANT TO GREENVILLE ORDINANCE NUMBER 122-A

Business Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Address: \_\_\_\_\_  
\_\_\_\_\_

Location(s) of proposed food vending service: \_\_\_\_\_

Proposed time and date of activity: \_\_\_\_\_

Description of materials to be used (cart, table, grill, tent, etc.): \_\_\_\_\_

Have you been convicted of a felony or misdemeanor? (choose one) YES NO

If yes, what was the nature of the offense and the punishment assessed? \_\_\_\_\_

\_\_\_\_\_

Please provide a copy of the Certificate of Approval issued by the Health Department for your operation.

Fees for food vendor license:	Day License	\$5
	Week License	\$20
	Month License	\$50
	Year License	\$250

Approved by Greenville City Clerk on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
City Clerk

Not Approved by Greenville City Clerk on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
City Clerk

Reasons for disapproval: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_