



OUTDOOR VENDOR CHECKLIST

Please read thoroughly - incomplete applications cannot be processed

Ш	Outdoor Vendor License Application
	Copy of City sales tax license
	Valid Larimer County Health Permit – food vendors only
	Valid PFA inspection tag for tented vendors and food vendors – <i>Contact PFA to schedule inspection, (970) 416-2891 or visit:</i> <u>www.poudre-fire.org/home</u>
	Site plan if on private property – instructions attached
	Authorization to utilize property – 3 days/wk maximum at each property. Extended vending options available through Zoning with Minor Amendment approval. Application can be found at: www.fcgov.com/zoning/what
	Proof of insurance if on public property – City named as an additional insured and certificate holder
	Colorado Secretary of State Document of Good Standing
	Images and dimensions of all 4 sides of structure or vehicle/cart etc.
	Images and dimensions of all signs proposed to be utilized by the applicant. Banners and flags to be permitted through zoning@fcgov.com
	Payment: \$60.00 for six months OR \$120 for 12 months



LICENSE APPLICATION OUTDOOR VENDOR

INFORMATION ON THIS APPLICATION IS PUBLIC RECORD.

Business Type (check all that apply):			Application Type (check one): ☐ New License ☐ Renewal						
 ☐ Mobile food truck ☐ Neighborhood mobile food vendor ☐ Outdoor vendor of miscellaneous goods & services ☐ Outdoor vendor of transportation services ☐ Pushcart 			Period of operation (check one): ☐ Six months / \$60.00 ☐ Year / \$120.00						
			Number of days each week/each location $\square \leq 3 \text{ days/wk} \qquad \qquad \square > 3 \text{ days/wk}$						
			VENDING >3 DAYS/WK REQUIRES MINOR AMENDMENT						
Applicant Name			Applicant is (check one):						
				□ individual □ corporation (State) □ partnership □ limited liability company					
Trade Name (doing business as)							her (please specify):		
Business Address			City		State		е	Zip	
Business Phone Business Fax			Email Address						
Mailing Address (if different from business address)				City	City State		е	Zip	
Name and Phone Number of Manager or Supervisor During Pr				roposed	Period of Opera	tion (if di	iffere	ent from ap	plicant):
City Sales Tax No. State Sales Tax No. (recommended)				Larimer County Permit (if applied Issue Date:					
Owners/Officers: If the Applicant is a corporation, partnership, entity, list all officers, directors, partners, or members. If more									er type of
Name Home Address, City, State,			ldress, City, State, Z	ip .	Telephone #	Position/Title % Interest		% Interest	
Proposed period of	operation	if less than	the entire six or twe	lve mon	th license period	l:			
If on PRIVATE PROPERTY, location(s) of operation: MUST MATCH AUTHORIZATION FORM			D	ays and Hours	of Oper	atio	n:		

If on PUBLIC PROPERTY, location(s) of operation:	Days and hou	rs of operation:		
Type of operation to be conducted (type of services, goods, wares or merchandise to be offered):				
Description of the design of any vehicle, pushcart, kiosk, table, chair, stand, box, container of other structure or display device to be used in the operation by the applicant including: o Images and dimensions of all 4 sides of structure or vehicle/cart etc. o Images and dimensions of all signs, attached or detached, proposed to be utilized by the applicant				
License plate number and registration information of any vehicle to be used:				
OATH OF APPLICANT				
I declare, under penalty of perjury, that the statements in this application, and all attachments to and documents submitted with this application, are true, correct and complete to the best of my knowledge. I understand and acknowledge that any information contained herein or submitted as a part of this application that is found to be false or misleading may result in this application being denied, or any license granted pursuant to this application, suspended or revoked, in addition to possible filing of applicable criminal charges. I also acknowledge that it is my responsibility to become familiar, and comply, with the provisions of Chapter 15, Article XVI of the Code of the City of Fort Collins.				
Signature	Title	Date		

Application Attachments:

- Site plan if location is on private property showing the location of all existing and proposed structures, access, equipment and parking.
- Authorization to Utilize Property MUST MATCH APPLICATION
- If on public property, provide insurance certificate City named as additional insured and certificate holder. (Commercial General Liability with a Combined Single Limit of \$500,000 per occurrence and Products Liability with a Combined Single Limit of \$500,000 per occurrence.
- Colorado Secretary of State Document of Good Standing.
- Copies of City, County and State sales tax licenses.
- If vending of food, Copy of Larimer County Health Permit.
- PFA proof of inspection food truck and tented vendors

Applications should be submitted to:

City of Fort Collins Sales Tax Division 215 N. Mason Street, 2nd Floor Fort Collins, CO 80522-0580 Phone: 970-221-6527

tkeegan@fcgov.com



Financial Services

Sales Tax Division 215 North Mason Street, 2nd Floor P.O. Box 580 Fort Collins, CO 80522

970.221.6780 970.221.6782 - fax fcgov.com/salestax

AUTHORIZATION TO UTILIZE PROPERTY DAYS/HOURS MUST MATCH LICENSE APPLICATION

I, the undersigned owner	of the premises at		, hereby consent to thefor the sole purpose of conducting			
occupancy of said premis	ses by	f(or the sole purpose of conducting			
	off-street parking of mo	tor vehicles for customers.	The hours of operation and period of			
Hours		_a.m. to	p.m.			
Days of	week					
Dates						
I understand thatabove under the terms at Colorado, including vaca	nd conditions of an Outd ting premises from 3:00	will operate his/hoor Vendor License to be is a.m. to 7:00 a.m.	er business on the premises described ssued by the City of Fort Collins,			
I FURTHER UNDERSTAN TO ESTABLISH OUTDOO			THROUGH THE ZONING DEPARTMENT			
In the event the licensee a license, this consent m			nse or attempts to operate without such			
I further understand that regarding the licensee's I		the City of Fort Collins assu	umes no legal liability or duty of care			
release the City, its empl	oyees, officers, agents a	and assignees from all liabil	nefit to myself and the licensee, I hereby lity for claims of damages of any kind uct of the licensee's business operation			
Signature of Property Ow	ner or Authorized Agen	<u> </u>	Date			
Print Name of Property C	Owner or Authorized Age	nt	Email			
Company Name of Prope	erty Owner		Telephone Number			

SITE PLAN – OUTDOOR VENDOR ON PRIVATE PROPERTY

Name of Business on Site:	Site Address:
Contact Person and Telephone Number:	

Basic safety requirements:

- Propane tanks shall not exceed 100 lb bottles. Tanks shall be anchored and secured to trailer.
- Electrical cords shall be of the "heavy-duty" usage type and sized appropriately for the electrical load.
- Electrical cords shall not pose a tripping hazard. Cords shall not interfere with wheelchair accessibility. Cords that are placed across pedestrian walkways shall be effectively taped to the surface and covered with walkway mats.

Provide a site plan drawing of your outdoor vendor operation below, or as an aerial map view from Google (preferred). Highlight the locations of all existing and proposed structures, access, equipment and parking.



Zoning Resources for Outdoor Vending









Auxiliary aids and services are available for persons with disabilities, V/TDD 711

Fort Collins

If you are promoting a business using a feather flag or banner, then you need a free permit under City of Fort Collins sign code.

To obtain a free permit, email **zoning@fcgov.com** or call **970-416-2745** with the following:

- · Banner or flag size*
- · Dates of display
- · Location of banner or flag

Once you have a permit, you may display the flag or banner for a period:

- Feather Flags: May be displayed 20 days per calendar year
- Banners: May be displayed 40 days per calendar year

*There are size and quantity limitations and banners/flags cannot be displayed concurrently.

18-20767

Approved Stationary Vendor Sites Address Site **Insulated Superstructures** 1901 E Prospect 602 S College Brook's Two Bit Barber Shop 1001 S Lemay Thirsty's Liquor 500 Linden St **New Belgium Brewery** 2535 S College Ave **Kmart** 4621 S Timberline La-z-boy 4502 JFK **Home Depot** 1251 E Magnolia Home Depot **Summit View Church** 1601 W Drake Odells 800 E Lincoln Ave