



City of Pomona
Sidewalk Vending
Business License Application

SECTION I.

BUSINESS NAME: _____

APPLICANT NAME: _____

BIRTHDATE: _____ **SOCIAL SECURITY NO:** _____

MAILING ADDRESS: _____

PHONE NUMBER: _____ **EMAIL ADDRESS:** _____

TYPE OF VENDOR (ROAMING OR STATIONARY): _____

DESCRIPTION OF ITEMS BEING SOLD: _____

NUMBER OF CARTS (2 MAX): _____

DESCRIPTION OF LOCATION OR ROUTE (PARKS AND DOWNTOWN PROHIBITED):

DAYS / HOURS OF OPERATION (HOURS ARE RESTRICTED): _____

OFFICE USE ONLY

- SIDEWALK VENDING BUSINESS LICENSE APPLICATION**
- INSURANCE CERTIFICATION**
- VALID LA COUNTY HEALTH PERMIT & FOOD HANDLERS CARD**
- VALID SELLER'S PERMIT**
- VALID IDENTIFICATION**
- LIST OF FOOD OR MERCHANDISE TO BE SOLD**
- CODE COMPLIANCE APPROVAL _____ (INITIALS)**

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SECTION II.

I, _____, have received and read the sidewalk vending Ordinance and rules and regulations, and;

1. Affirm that any food carts will be operated by a vendor who has been issued a LA County Public Health food handlers card and it will be worn and visible at all times while working at the cart.

2. Agree to defend, indemnify, and hold harmless the City of Pomona, its officers, and employees from and against any and all claims, demands, actions, losses, judgements, fines, penalties, liabilities, costs, and expenses (including without limitation, attorney fees, disbursements, and court costs) of every kind and nature whatsoever which may arise from or in any manner relate (directly or indirectly) to applicant's sidewalk vending activities.

3. Acknowledge that the use of public property is at the sidewalk vendor's own risk as the City does not ensure public property is safe for or conducive to sidewalk vending.

SIGNATURE _____

DATE _____