



Town of Marystown
150-168 Ville Marie Drive, P.O. Box 1118
Marystown, NL A0E 2M0
Telephone (709) 279-1661 Fax (709) 279-2862
info@marystown.ca www.marystown.ca



VENDOR PERMIT APPLICATION

Applicant Name: _____ Ph: (H) _____ (C) _____

Business Name: _____

Mailing Address: _____

Email Address: _____

VENDOR INFORMATION

Proposed Location(s): _____

Property Owner’s Name: _____

Description of Unit: (e.g. Stand/Vehicle): _____

Description of Sales: (e.g. food/retail): _____

Proposed Duration: ☐ One Day ☐ One Season ☐ One Year

_____ to _____

(Start Date) (End Date)

REQUIRED APPROVALS

- ☐ Written letter of Permission from Property Owner (if other than applicant)
- ☐ Payment of applicable fees

FEE SCHEDULE

- ☐ \$25.00 Daily Rate (24 Hours)
- ☐ \$200.00 Seasonal Rate (4 Months) (Note: \$20.00 for each additional month)

I hereby certify that the information in this application, to the best of my knowledge, is accurate and true.

Name (please print) Signature Date

- Notes on completion of this form
1. This form is not valid unless all questions are answered correctly and the form signed and dated.

2. If you are not the owner of the location, permission is required from the owner.

3. If applicable, contact Government Services for approval (<https://www.gov.nl.ca/gs/>)

For further information, please review the Town of Marystown’s Development Regulations

<https://marystown.ca/site/uploads/2020/09/development-regulations-2017-2027.pdf>

OFFICE USE ONLY

PLANNING & DEVELOPMENT DEPARTMENT USE ONLY

- The area applied for is zoned: ☐ Residential ☐ Commercial ☐ Industrial ☐ Other
- The proposed use is: ☐ Permitted ☐ Discretionary ☐ Not Permitted
- ☐ Civic Address Confirmed ☐ Permit Payments Received

STATUS OF APPLICATION

- ☐ Approved Date: _____ ☐ Rejected Date: _____
- ☐ Deferred Date: _____ Reason for Deferral: _____

FINANCE DEPARTMENT USE ONLY

- Occupancy Permit Obtained: _____ Date Info sent to MAA: _____
- MAA Response Received: _____ Info Inputted to TownSuite: _____

Comments: _____
