

TOWNSHIP OF SPARTA - OFFICE OF MUNICIPAL CLERK

65 Main Street, Sparta, New Jersey 07871
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APPLICATION FOR FARMER'S MARKET VENDOR LICENSE

Vendor Information

Trade Name: _____ Phone _____

Contact Person _____ Email _____

Mailing Address: _____
(Street) (City) (State) (Zip Code)

Event Information

Name of Event _____ Location of Event _____

Date(s) of Event _____ Hours of Operation _____

Name of Event Coordinator _____ Phone _____

Email _____

Types of food to be served: _____

Name & Address of Suppliers of Food Products: _____

Means of Refrigeration: _____

In making this application, I hereby agree at all times to comply with all ordinances of the Township of Sparta and the laws of the State of New Jersey applicable to such establishments.

Print Name of Owner or Authorized Agent /Title

Signature - Date

For Office Use Only

License #: _____ Receipt #: _____ Date: _____

Farmer's Market – Mobil License - \$75.00