

# Town of St. Johnsbury

Office of Zoning Administration

51 Depot Square, Suite 3

St. Johnsbury, VT 05819

Phone: (802) 748-3926

## APPLICATION FOR STREET VENDOR, BUSKER, or EVENT PERMIT

\$15.00 PER OCCURANCE / \$150.00 ANNUAL \_\_\_\_\_, 20\_\_

Application for Vendor/Busker/Event Permit is requested by \_\_\_\_\_

of \_\_\_\_\_ to perform, operate or maintain within the limits of the  
Town of St. Johnsbury the activity described below:

\_\_\_\_\_  
\_\_\_\_\_

at the following location(s) \_\_\_\_\_

on the following date(s) and time(s) \_\_\_\_\_,

under and subject to such rules and regulations and restrictions as the Town of St. Johnsbury, by its  
duly constituted officer may, from time to time, prescribe and fix. I understand this permit may be  
revoked for failure to conform to such rules, regulations and restrictions, and for any other just  
cause as determined by the appointed authority.

Contact Phone Number \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Printed Name of Applicant

Signature of Applicant

Date

PERMIT No. \_\_\_\_\_, 20\_\_

This certifies that a permit is granted to \_\_\_\_\_ of

\_\_\_\_\_ to perform, operate or maintain within the limits of the  
town of St. Johnsbury \_\_\_\_\_

under and subject to such rules, regulations and restrictions as the Town of St. Johnsbury, by its  
duly constituted officers may, from time to time, prescribe and fix. This permit is revocable for  
failure to conform to such rules, regulations and restrictions as noted on the reverse side of this  
permit and for any other just cause as determined by the appointed authority. This permit expires on  
\_\_\_\_\_, *Conditions of this permit are recorded on the reverse side of this document.*

\_\_\_\_\_  
Signature of Zoning Administrator

Date

town seal +

*Have this original permit available to present upon request by a town authority*