



NEW BERN PARKS & RECREATION DEPARTMENT
Vendor Application Form 1307 Country Club Rd.
New Bern, NC 28562

Date: _____ Business Owners Name: _____

Name of Business: _____

Address: _____

CITY: _____ State: _____ ZIP CODE: _____

HOME PHONE NO.: _____ CELL PHONE NO.: _____

E-MAIL : _____

Type of vending Services: _____
(Explain good(s) being sold in detail)

Operations:

Location of Operation: _____

Days of Week requested: _____

Time of Operation: _____

For office use only

Craven County Food Vending Permit	_____ Yes	_____ No	_____ N/A
List of product sold	_____ Yes	_____ No	_____ N/A
Valid Insurance Policy	_____ Yes	_____ No	_____ N/A
Vending Services Agreement	_____ Yes	_____ No	_____ N/A

A completion of this application does not guarantee approval of services requested.