



Street Vendor Registration

Development Services Center

City-County Development Services Center

101 City Hall Plaza, Durham, NC 27701 | <https://dsc.durhamnc.gov> | 919-560-4137

Request for: New Renewal Amendment

ABOUT THIS APPLICATION

This application is for registration purposes only. Only vendors selling food within the City public street right-of-way in the Durham City limits must complete this registration form. The registration shall be renewed by July 1st of each year. The registration fee is \$10.40 per cart or truck operated by each vendor. Only one application per vendor is required even if the vendor has multiple carts or trucks.

Submit To: Durham Development Services Center, Ground Floor, City Hall, 101 City Hall Plaza, Durham, NC 27701

Contact Information: If you have any questions about this application, please contact the Development Services Center at 919-560-4137 between 8:00 a.m. and 5:00 p.m. Monday – Friday, or visit <https://dsc.durhamnc.gov> for further information.

Please bring or mail a complete application, **including a copy of your current Durham Co. Health Department or Dept. of Agriculture permit**, and fee to the address above. Make checks payable to “City of Durham.” Out-of-state and starter checks will not be accepted. Cash payments or credit cards are only accepted if submitted in person at City Hall.

APPLICANT INFORMATION

Applicant Name:	Email:
DBA/Business Name:	Telephone #1:
Company Name (if different):	Telephone #2:
Street Address:	City/State/ZIP:
Contact Person:	Contact Telephone:

Please fill in the number of carts ____ and/or trucks ____ associated with the business

I hereby certify that the information contained in this application is true to the best of my knowledge. I further certify that all sales associated with the business listed above will be conducted per all applicable state and local laws, and understand that only food and non-alcoholic beverages may be sold. I certify that I have attached a copy of my current permit from the Durham County Health Dept. or NC Dept. of Agriculture, as applicable, and received a copy of the regulations for Street Vendors.

Applicant Signature

Date

Tracking Information (Staff Only)

Registration #: STV	Date/Time Rec'd:	Rec'd By:
Previous Registration #: <input type="checkbox"/> HO or <input type="checkbox"/> BV #:	Previous # of Carts/Trucks:	Prev. App/Renewal Date:
<input type="checkbox"/> Fee: \$10.40 x ____ carts/trucks = \$_____ Total Fee Paid	<input type="checkbox"/> Copy of Current Health Dept./ Agriculture Dept. Permit Attached	Any Violations? <input type="checkbox"/> Yes <input type="checkbox"/> No Prev. Reg. Revoked Date:

Staff Notes: