



# 2024 Food Vendor Application

Name of business: \_\_\_\_\_  
*(Please type or print your name as you would like it to appear in the program.)*

Name of owner(s): \_\_\_\_\_

Name of contact person if different from owner: \_\_\_\_\_

Street address: \_\_\_\_\_

City, state, zip code: \_\_\_\_\_

Best phone(s) to reach you: \_\_\_\_\_  
*(Please specify which, if any, are cell numbers.)*

E-mail: \_\_\_\_\_

Menu items: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe your food truck or stand, including size: \_\_\_\_\_  
\_\_\_\_\_

Do you use propane? Yes      No

Will you be using the supplied electricity? When? \_\_\_\_\_

Requirements – amps/volts? \_\_\_\_\_  
\_\_\_\_\_

Any other requirements? \_\_\_\_\_  
\_\_\_\_\_

X \_\_\_\_\_  
Signature and date

- If accepted as a vendor, we ask for current copies of:*
1. License or special event permit from City of Edina
  2. ST 19
  3. Certificate of Liability Insurance
  4. Letter of agreement (we will provide for your signature)

