



TOWN OF MEETEETSE

P.O. Box 38

Meeteetse Wyoming 82433

(307) 868-2278 Fax (307) 868 2608

Email: meeteetse@tctwest.net

Vendor Permit _____ **Date Submitted** _____
Permit Fee \$5/day _____ **Electricity \$25/day** _____

Permit # _____

Vendor Permit Applicant _____

Address _____

Phone Number _____

Date of Event: _____

Brief Description of reason for permit request. _____

Description of area where vendor permit is to be used. _____

Food Truck Vendor please provide Liability Insurance Minimum \$1,000,000.00 & State Issued Food Permit.

Date: _____ **Applicant's Signature** _____

APPROVED _____ **DENIED** _____ **DATE** _____

MOTION # _____

The Mayor and Town Clerk will provide written approval or denial.

Mayor

Clerk

Fee Paid \$ _____ **Date Issued** _____

Comments or Special Conditions: _____

Reason(s) for Denial: _____