City of Arco
PO Box 196 ♦ 302 W Grand Ave
Arco, ID 83213 ♦ (208) 527-8294

Vendor / Special Event Permit Application

Business Name: _____ Address:_____

Applicant Name:_____ Phone No._____

Vendor Type (Select all that apply):

☐ Merchant Sales ☐ Food/Beverage ☐ Alcohol* ☐ Other_____

Permit Requested (Select One):

☐ 1 Year ($250) ☐ 1 Month ($75) ☐ 3-Day ($25) ☐ Special Event ($25)

Details:

_____ _____

Vending Location Dates of Operation

Name of Special Event
& Description of Activities

_____

_____

_____

Permissions / Restrictions

- *Vendors must operate on Commercially Zoned Property (unless part of a Community Sponsored Event)*
- *Vendors are NOT permitted to conduct business on Public/City Owned Property*
- *Written permission from property/business owner required*
- *If Alcohol is included in event, a separate Liquor Catering Permit is also required**

_____

Applicant Signature Date

COPY OF THIS DOCUMENT, WHEN APPROVED, CONSTITUTES A LICENSE AND SHALL BE POSTED AS REQUIRED

For Internal Use Only

APPROVED: ☐ YES ☐ NO Permit Valid From: _____thru _____

_____

Signature of City Official

METHOD OF PAYMENT

- Check No. _____
- Cash
- CC

City of Arco Municipal Code Title 5 Business Licenses and Regulations
Chapter 5.04 Business Licenses