

Stamp Here
for
Date
Received



HIGHLANDS RANCH Metro District

3280 Redstone Park Circle
Highlands Ranch, Colorado 80129

303-791-2710
303-791-3047 Fax

Park Vendor Permit Application

Applicant Instructions – Please complete this entire application prior to accessing Metro District property with a motor vehicle or vending equipment. An incomplete application will delay the permit process. Submit the completed application to the Metro Districts Parks & Open Space Service Center. Your application will be processed within five business days. **This application does not guarantee a vendor permit will be granted**

1. Owner or Company Information:

Owner or Company: _____ Phone: _____

Owner or Company Representative Name or Contact: _____

Office: _____

Phone # Cell: _____

Address: _____

Sales Tax License #: _____

Commercial Vendor OR Non Profit (no fee)

2. Staff/Operator Information (if different from Owner/Company)

Representative / Staff (list all): _____

Address: _____

Office: _____

Phone # Cell: _____

3. Insurance Provider (attach copy)

Attach Copy of Insurance Provider:

o **Name Of Insured** _____

o **Insurance Provider** _____

o **Policy #** _____

Verified By Metro Districts PROS

Name

Tri County Health Cert. (Provide Copy)

Has a Tri County Certificate Been Issued?

o **Yes** Number _____

o **No**

4. **Background Check Information:** A criminal background check must be completed on all company owner/staff or operators working in Metro District Parks. Background checks may be completed for a nominal fee online at Colorado Bureau of Investigation - <http://cbi.state.co.us> Approved checks must be submitted with application.
5. **Vehicles to be Used and Products to be sold:** A. Describe all vehicles to be used, including trailers & other equipment, which will be used for vending of products. B. Describe type of product to be sold and product prices: *Approved vehicles are only permitted in parking lots. Vehicles are not permitted within Metro District Parks or on trails. Permit must be displayed in the window of all vehicles & equipment at all times when vending.*

Vehicles and or equipment:

o Year/Make/Model of Vehicle: _____

o License # _____

o Proof of Insurance
Yes _____ No _____ Initial _____

Products to be sold and prices: (briefly describe below)

Product	Price
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Location(s) requesting to sell: _____

7. Date(s) and Time(s) of Access:

Date(s)	Time(s)

