

Parks Authorization Letter (PAL) Application Form for Mobile Food Vendors

Client I.D. (Issued by Client Registry, Alberta Energy) <input style="width: 150px; height: 20px;" type="text"/> --- <input style="width: 80px; height: 20px;" type="text"/>	GLIMPS File Number: PAL _____
<i>If you do not have a Client I.D., complete the "Application/Amendment for Client I.D." form and provide it with this application form.</i>	

Applicant Details			
Applicant (Business Name) <input style="width: 95%; height: 25px;" type="text"/>	Authorized Representative (Name) <input style="width: 95%; height: 25px;" type="text"/>		
Business Address <input style="width: 95%; height: 25px;" type="text"/>	City <input style="width: 80%; height: 25px;" type="text"/>	Province/Territory <input style="width: 80%; height: 25px;" type="text"/>	Postal code <input style="width: 80%; height: 25px;" type="text"/>
Business Phone <input style="width: 80%; height: 25px;" type="text"/>	Home Phone <input style="width: 80%; height: 25px;" type="text"/>	Cell Phone <input style="width: 80%; height: 25px;" type="text"/>	Email Address <input style="width: 95%; height: 25px;" type="text"/>
Business Licence Number <input style="width: 80%; height: 25px;" type="text"/>	Date Issued (mm/dd/yyyy) <input style="width: 80%; height: 25px;" type="text"/>	Expiry Date (mm/dd/yyyy) <input style="width: 80%; height: 25px;" type="text"/>	Issued by (City/Municipality) <input style="width: 95%; height: 25px;" type="text"/>

Any personal information provided in this application is collected in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP) and is protected by the privacy provisions of that Act. Alberta Environment and Parks (AEP) collects, uses and discloses personal information in accordance with Part 2 of the FOIP. If you require more information about the collection, use and disclosure of personal information, please contact Parks Division at 780-427-3582.

Vendor Unit Type				
Select the vending type below that best describes your unit and fill out the vehicle registration information if required. (Each vending unit requires a separate application.)				
ICE CREAM TRUCK	FOOD TRUCK	SIDEWALK CART	TRAILER	TABLE
Make <input style="width: 80%; height: 25px;" type="text"/>	Model <input style="width: 80%; height: 25px;" type="text"/>	Year <input style="width: 80%; height: 25px;" type="text"/>	Colour <input style="width: 80%; height: 25px;" type="text"/>	Licence Plate <input style="width: 80%; height: 25px;" type="text"/>

Required Documents (Photocopy)			
<i>Vendor must submit proof of the following: (Note: minimum \$2,000,000 liability insurance required.)</i>			
Business Insurance	Vehicle Insurance	Alberta Health Services Food Handling Permit	WCB Coverage

Business Operations	
Proposed Location (Park Name)	<input style="width: 80%; height: 25px;" type="text"/>
Describe your proposed service delivery, including dates, hours of operation, etc. <input style="width: 95%; height: 40px;" type="text"/>	
Describe the products and/or services you intend to provide. <input style="width: 95%; height: 40px;" type="text"/>	
Have you contacted the Regional Contact (listed on www.albertaParks.ca/MobileFoodVendors) about your proposal? Yes No	

Fees	
Fifty Dollar (\$50) application fee enclosed? Yes	<i>(Cheque or Money Order made payable to Government of Alberta. Application can not proceed without fee.)</i>

_____ Applicant Name	_____ Applicant Signature	_____ Date (mm/dd/yyyy)
<u>FOR DEPARTMENT USE ONLY</u>		
_____ For the Regional Director or Designate		_____ Date (mm/dd/yyyy)

Regional contacts listed on www.AlbertaParks.ca/MobileFoodVendors can assist with answering questions on completing this form.