



City of Alton

416 S Alton Blvd. Alton, Texas 78573
Ph: 956-432-0730 Fax: 956-432-07633 www.alton-tx.gov

Flea Market Vendor's Permit Application

Vendor

Name

(Phone)

(Email)

Address:

(Street)

(City)

(State)

(Zip)

Business Name:

Business Type:

Where will you vend?

Select duration of permit:

☐ Los Portales Flea Market

☐ 12 Months \$25.00 (\$50)

☐ 3 Months \$10.00 (\$20)

☐ 812 Market Flea Market

☐ 6 Months \$15.00 (\$30)

☐ One Day \$5.00

☐ Other / Both _____

* * * (additional inspection fees may apply) * * *

REQUIREMENT: LEASE AGREEMENT OR DEPOSIT RECEIPT FROM FLEAMARKET

ADDITIONAL REQUIREMENTS ONLY FOR FOOD PREPARATION/RESTAURANT TYPE ESTABLISHMENTS

COPY OF MENU OR LISTING OF FOODS TO BE SERVED

GREASE TRAP - MOBILE UNITS MUST PROVIDE COPY OF AGREEMENT FOR GREASE DISPOSAL

LIST HOURS OF OPERATION: Hours per Day: _____ Days per Week: _____ Seating Capacity: _____

HEALTH PERMIT BY CITY OF ALTON

SELECT ANY KITCHEN FIXTURES AT LOCATION (INCLUDE FLOOR DRAINS):

☐ 3 Compartment Sink

☐ Fridge/Freezer

☐ Stove

☐ Fryer

☐ Hand Wash

☐ Mop Sink

☐ Ice Maker

☐ Oven

☐ Grills

☐ Dishwasher

☐ Floor Drain

☐ Prep Table

☐ Microwave

☐ Dough Mixer

☐ Blender

Print Form

"THE PERMIT HERBY APPLIED FOR IS SUBJECT TO ALL PROVISIONS AND REGULATIONS OF THE LATEST ADDITION OF THE INTERNATIONAL BUILDING CODE AND ITS SUPPLEMENTS AND THE FLEA MARKET ORDINANCE OF THE CITY OF ALTON. THE APPLICANT HEREBY AGREES TO ABIDE AND BE GOVERNED BY SAID CRITERIA." *Note: City Flea Market permit is transferable from market to market. Inspections will be required per vending site. (Not applicable for Bargain Bazaars)

Applicant Signature _____ Date _____

OFFICE USE ONLY

Incident # _____ Date entered in INCODE _____ By _____