UT Football Food Vendor Permit Request Form

Applicant Name: __________________________________________________________ Date: _____________________

Business/Organization Name: ____________________________________________________________________________________

Address: _______________________________________________________________________________________________

City: _______________________________________________ State: _______ Zip: ________________

Phone #: __________________________________________ Email: ________________________________

Type of Vendor Permit Being Requested: (See description of permit types on page 2.)

Methods of Payment: Cash, Cashier's Check, or Money Order only.

☐ Stationary, $25.00 fee ☐ Pedestrian, $25.00 fee

Requested Date: ____________________________________________

Requested Times: From: _____________ To: _____________

Name of Event Selling At: ______________________________________________________________________________________

Description of Product(s) to be Sold:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

For Both Permit Requests Types, Provide the Following Information:

Applicant's Business License #: ______________________________
Business License from: City of ________________________ or County of ________________________

For Stationary Vendor Permit Requests, Provide the Following Information:

Applicant's Federal Employers Identification Number:

_________________________________________________________________________________________________________

***A copy of the vendor's business permit should be submitted along with this form.***

________________________________________
Signature of Applicant

________________________________________ Date: _________________
Signature of Approver

Brian Browning, Director, Finance & Administration

Return Completed Form to utoperations@utk.edu.