



# City of Crystal River

123 Northwest Highway 19  
Crystal River, Florida 34428  
Telephone: (352) 795-4216  
Facsimile: (352) 795-6351

## Roadside Vending Checklist

**Permit Fee: \$75.00**

Land Development Code, Chapter 4, Section 4.02.07 – Design Standards for Roadside Vending in Commercial Highway (CH) Zoning Districts. (**Note:** Roadside Vending only allowed in CH zoning district)

### A. **Temporary accessory structures, vehicles or trailers associated with Roadside Vending:**

1. Can only be permitted on a site which is fully developed per the City of Crystal River Land Development Code, open to the public and holds an active Business License for a permanent business located on the property in question. Sufficient customer parking must be provided on an improved surface.

Temporary accessory structures, vehicles or trailers associated with Roadside Vending is limited to a maximum of 200 square feet, may not block the use of more than two parking spaces of any approved principal use and shall comply with the visibility at intersection requirements of this chapter.

2. Cannot be located within approved setbacks or right of ways. Stopping and parking a vehicle in the right-of-way to make purchases is prohibited.
3. Must be self-contained, no permanent structure shall be erected and all items associated with the roadside vending market shall be removed at the end of each day. There shall be no water or sewer service to a roadside vending market.
4. Shall not leave the structure unattended for more than thirty (30) minutes.
5. May not obstruct vehicular or pedestrian traffic or enter upon any no-parking area or loading zone.
6. Shall not display any signs or flags which are not in compliance with the City's sign or flag ordinance.
7. Must submit an application for approval under the terms of a Minor Development Permit with the following information:
  - a. Applicant must submit a statement of express written approval for the proposed activity from the property owner.
  - b. Applicant **must** submit a site plan showing the location of the temporary accessory structure, including all proposed signage.(Emphasis added)
  - c. Applicant must include a statement of proposed use that complies with the City's Land Development Code.
  - d. Applicant must have a current Business License with the City of Crystal River.
  - e. Copy of the state or county health department license.

**B. Procedure.**

1. In order to protect the health, safety, and welfare of the general public, or to obtain compliance with local, state or federal laws, special conditions and restrictions may be added to the permit which shall be binding upon the applicant, to any permit or other form of approval that may be issued.
2. Expiration. A roadside vending permit shall expire on September 30 of each year but may be renewed on an annual basis.
3. Suspension and revocation. A permit issued under this section may be suspended or revoked by the City if any required business or health permit or license for the roadside vending market has expired or been suspended, revoked or canceled. In addition, a permit may be immediately revoked if the applicant violates any of the requirements of this Ordinance.
4. Record keeping. Each roadside vending market operating within the City shall display the appropriate business tax receipt and state or county health permits or licenses.

**C. Signage**

1. Temporary signage. ***One temporary sign per site shall be allowed.*** A dimensioned drawing of the signage shall be submitted for approval along with the Roadside Vending permit application. Such sign shall have a maximum height of eight feet and a maximum area of 12 square feet. Signage cannot be placed in the right of way or block visibility. (Emphasis added)



## Mobile Vendor Application

Permit Number: \_\_\_\_\_

Date of Application \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Site Location: \_\_\_\_\_

Property Owner/Manager: \_\_\_\_\_ Contact: \_\_\_\_\_

### Business Information:

Legal Name \_\_\_\_\_

(Full Name of Legal Owner of business as registered with Department of Revenue or Corporate Name registered with the State)

Trade Name (DBA) \_\_\_\_\_

Type of Business \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Corporation  LLC  Partnership  Sole-Proprietor  Other \_\_\_\_\_

UBI# \_\_\_\_\_ FEIN # or SS# \_\_\_\_\_

### Business Owner Information:

Owner's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Co-Owner's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

### Additional Information

Description of Items, Goods to be sold \_\_\_\_\_

Vehicle/Cart License Plate Number \_\_\_\_\_ State \_\_\_\_\_

Vehicle/Cart Owner's Name \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Where is the Vehicle/Cart stored? \_\_\_\_\_

Tent Information (if applicable): \_\_\_\_\_ L Sq. Ft. x \_\_\_\_\_ W Sq. Ft. = \_\_\_\_\_ Total Sq. (See Tent Checklist)

**Required Attachments:**

- Copy of your Picture ID
- Copy of Business License.
- Copy of Heath Dept. Certificate.
- Copy of Vehicle Registration (if applicable)
- Copy Letter from Property Owner
- Site Plan, no less than 11" x 17", showing location of vendor, parking spaces being used.
- Tent Flame Retardant Certificate
- Signed Tent Checklist

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My Signature below certifies that the information provided on this application and any attachments is/are true and accurate. I understand my business must comply with all City of Crystal River codes and ordinances.

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Signature

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Date

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Print Name

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**For City Use Only**

Zoning Department: Approved:   Approved with Conditions  Denied

Conditions: \_\_\_\_\_  
\_\_\_\_\_

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Signature

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Date

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Title

Building Department: Approved:   Denied  N/A

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Signature

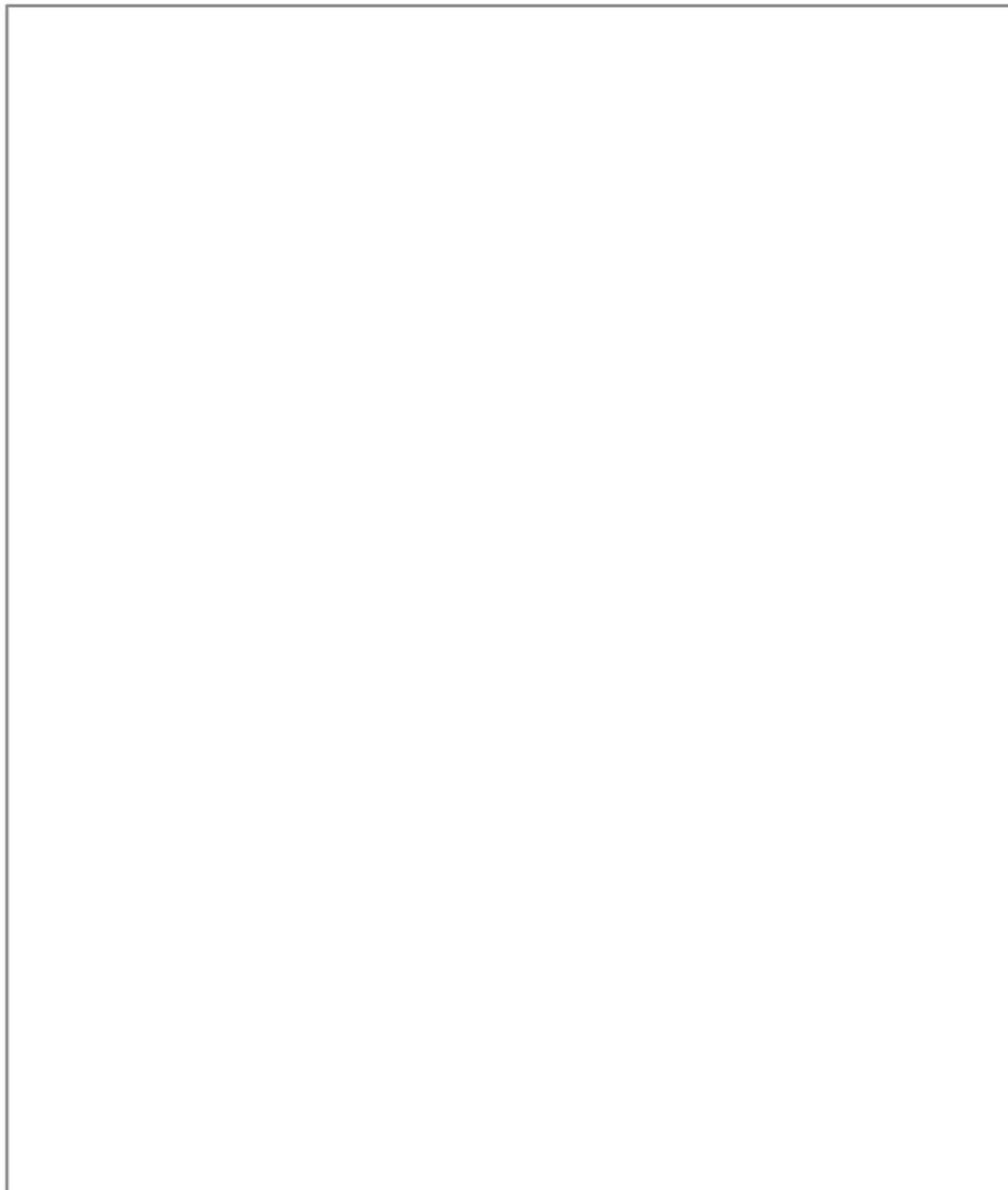
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Date

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Building Official  
Title

**ATTACHMENT 1: Sign Dimensions And Location:**



## **TENT CHECKLIST**

Tents come in various sizes and shapes and are used for a variety of purposes. This information Sheet is provided to assist tent users or property owners with what is required by the Building Code for the State of Florida.

Please submit the following information, if applicable, with your tent permit application:

- Site Plan
- Flame-Resistant Treatment/Certificate (this is sometimes sewn into the seam of the tent)
- All tents must be anchored to the ground and secured to prevent collapse and/or rollover during high winds.
- Separation of Generators
- Electrical Equipment
- Portable Fire Extinguishers
- Egress and Exits



\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name