



## TOWN OF ACTON ECONOMIC DEVELOPMENT OFFICE

472 Main Street  
Acton, Massachusetts, 01720  
Telephone (978) 929.6611

Website: [www.acton-ma.gov](http://www.acton-ma.gov) E-Mail: [economicdevelopment@actonma.gov](mailto:economicdevelopment@actonma.gov)

# 2026 EVENT VENDOR PERMIT

**Complete Sections I & II only and sign form. VENDOR** must file application with the Acton Recreation Department at least TWO WEEKS prior to the date desired. Incomplete applications will be returned. Please allow up to two weeks for your application to be processed. Upon approval of application, full payment is due to secure vending at event. **Permit will be issued once payment and all Health Department Permits and Fire Permits (if applicable) and other required permits have been completed.** Please note that you are responsible that all your employees/volunteers follow the standards set forth by the Acton Board of Health. A vendor is not an employee of the Town of Acton. The Town of Acton has the right to withdraw this permit at any time for failure to comply with term, weather or event conditions. No Refunds will be issued once a permit has been approved.

**No multiple event dates—each event must have its own permit**

### Section I

Application Date: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Vendor Name/Business \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: Home (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Website: \_\_\_\_\_ Number of Employees @ Event: \_\_\_\_

Describe Vending Area: \_\_\_\_\_

Number of Spaces (10 x 20) Requested: \_\_\_\_

Number of tents you plan to bring to your site: \_\_\_\_ Dimensions of set-up: \_\_\_\_ length \_\_\_\_ width \_\_\_\_ height

Preferred form of contact for receiving future vendor applications: e-mail \_\_\_\_\_ address \_\_\_\_\_

EVENT DATE REQUESTED:

Date: \_\_\_\_\_ Time Requested: Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Menu must be approved upon receipt of application to avoid inappropriate duplication of food/beverage items. **If menu items are not listed and are in conflict with another vendor, we reserve the right to ask you to stop serving item(s) of conflict.** Once menu is approved, vendor should contact the Acton Board of Health for permit application.

### Section II

**WILL FOOD OR BEVERAGE BE SOLD? \_\_\_\_\_ IF YES, BE SPECIFIC**

**LIST ALL:**

Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____

If additional space is needed, please add a page: Page added: YES NO (please circle)

**DO YOU PLAN TO SELL ALCOHOL? BEER \_\_\_\_\_ WINE \_\_\_\_\_**

***Beer and wine are not permitted at some events including July 4<sup>th</sup> Celebration.***

1. Has a liquor permit\* been obtained by the Select Board? \_\_\_\_\_ (Apply no less than 30 days from event date). \*A separate application and fees for liquor license is obtained through the Town Manager's Office—please note this application if filed with the Board of Selectmen and is needed at least two weeks prior to your event.  
978-929-6611

**HEALTH & FIRE & LIQUOR PERMIT REQUIRED**

1. A Health Permit is required for all food vendors. Vendors must comply with all SAFE Serve regulations for food service: 978-929-6632
1. Any vendor using gas for cooking must obtain a permit from the Acton Fire Department: 978-264-9645

**CERTIFICATE OF INSURANCE**

1. All vendors must supply prior to event, a Certificate of Insurance (including automobiles) listing the "Town of Acton" as additional insured showing proof of coverage for event date(s).

**USE OF ALLOCATED SPACE(S) & TIME**

1. Town of Acton reserves the right of approval for the vending unit.
2. Town of Acton reserves the right of approval for items to be sold, and the specific price to be charged for each item in order to insure value and consistency.
3. Vendor shall provide adequate personnel for the operating hours of the event.
4. Vendor may not sell alcoholic beverages without special liquor permit/authorization.
5. Vendor may not consume alcoholic beverages.
5. Vendor shall not use noisemaking devices or public address systems in or around their allocated space without prior approval.
6. Vendor shall comply with all laws, ordinances, rules and regulations of any lawful authority, agency or government entity which apply to the use of its vending unit requirements, including without limitation, any applicable fire and building code of the Town of Acton, and health regulations of the Acton Board of Health Department.
7. Vendor agrees to indemnify and hold harmless the Town of Acton, its officers, directors, representatives, employees, volunteers, and agents for all penalties, fines, costs, expenses, damages, from the participating vendor's failure to comply with such laws.
8. Vendor accepts decision of Town of Acton in disputes between vendor and any other event participant or on any matter not covered by this permit.
9. Any portable equipment (i.e. pop-up tents) should be staked security.
10. Vendors shall arrive on-time per time arrangement with Town of Acton prior to event.  
Late arrivals are subject to being denied access into the event.

11. Vendors shall depart at a time designated and authorized by the Town of Acton at the conclusion of the event.

**VENDING UNIT:**

1. Vendors should have adequate protection for inclement weather, the sun and heat.

**EQUIPMENT:**

1. All equipment must be supplied by vendor including but not limited to: water, ice, coolers, tables, tents, electrical-generators, trash cans, grills, accessories, lighting.  
Please have a designated recycle trash barrel for bottles/cans.

**CARE OF ALLOCATED SPACE AND VENDING UNITS**

1. Vendor shall maintain allocated space and vending unit in a neat, safe and orderly condition during the event. Vendor property in the back of the booth must be stacked/stored to maintain an appropriate appearance.

2. Vendor shall be responsible for set-up and removal of their own equipment, fixtures, inventory and other property. Set-up hours will be arranged with the Town's Event Coordinator for the event.
3. Vendor shall furnish trash containers and bags, and bag all garbage and trash on a regular basis during the event. **At the conclusion, vendor must remove trash, including cooking oil and/or grease, charcoal, and equipment from the allocated vending space.**
4. Charcoal must be placed into an aluminum can and must be removed by vendor. No dumping of coals permitted.
5. Vendor shall surrender allocated space to the Town of Acton at the end of the event in the same condition as when vendor assumed occupancy and shall pay to the Town of Acton such amounts as shall be sufficient to restore such space to the same condition as when vendor arrived.

**PARKING:**

1. Trailers and employee vehicles must be parked in parking lot. Vendor will need approval of event coordinator for any trailers or vehicles needed in vendor area.

**SUBLETTING OR ASSIGNMENT:**

1. Vendor shall not sublet, assign or donate allotted space, in whole or in part.
2. Vendor shall occupy only the assigned space.

**SECURITY:**

1. Vendor agrees that The Town of Acton, its officers, directors, representatives, employees, volunteers and agents shall have no responsibility whatsoever for any loss or damage to vendor's equipment, supplies, goods or other property.
2. Vendor acknowledges awareness that any equipment left outside of event hours is not the responsibility of the Town of Acton.

**INDEMNIFICATION:**

The Vendor or user of the facility/field will hold the Town of Acton, its officers, directors, representatives, employees, volunteers, and agents harmless from any problem resulting from the leasing or utilization of the premises. The Town of Acton reserves the right to withdraw any permit, whenever, in its discretion, such cancellation seems advisable. No refunds are given once a permit has been issued.

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Representative's Signature

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Printed Name/Title

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Company

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Date

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**Please make check payable and mail to: Town of Acton, Recreation Dept., 472 Main Street, Acton, MA, 01720**

**Note: No refunds will be issued within fourteen days of the event date. Refunds requests must be submitted in writing 14 (fourteen) business days in advance of the scheduled event date. Refund for permit fee paid less a \$50 processing fee will be issued pending approval. Please allow up to 45 days for refund to be processed.**

Limited number of spaces available.

Confirmation of food menus must be determined no less than 14 days prior to the event date.

Vendor must remain open until 9:30 p.m., unless otherwise directed by Town of Acton Staff.

Vendors are not permitted to bring pets on event grounds.

*If you have photos of your set-up and food items, please send them to us. You can also send us your logos.*

**REQUIRED SERVICES ASSIGNED:**

\_\_\_\_\_ Fire – permit required for any vendor using propane gas to cook (Obtained at the Fire Department-separate fee through FD) - 978.929.7722

\_\_\_\_\_ Health Department Permit (Obtained at the Board of Health-separate fee with BOH) - 978.929.6632

\_\_\_\_\_ Liquor License (*see Section II*) -- 978.929.6611

\_\_\_\_\_ Certificate of Insurance Required for All Food Vendors

**VENDOR FEES:**

Vendor Fee \$ \_\_\_\_\_

**VENDING PERMIT FOR RECREATION/TOWN EVENT:**

**( ) THIS APPLICATION IS APPROVED FOR VENDOR AS SPECIFIED AT EVENT \_\_\_\_\_ and will be located at \_\_\_\_\_**

**( ) THIS APPLICATION IS DENIED FOR THE FOLLOWING REASONS:**

Permit issued by \_\_\_\_\_  
Economic Development Office \_\_\_\_\_ Date \_\_\_\_\_

Special Instructions:


If needed, additional notes are attached: YES NO

Copy has been sent to those checked off:

\_\_\_\_\_ Grounds \_\_\_\_\_ Police \_\_\_\_\_ Fire \_\_\_\_\_ Health Department \_\_\_\_\_ Town Manager  
\_\_\_\_\_ Vendor Copy \_\_\_\_\_ NARA Park Ranger \_\_\_\_\_ Economic Development Office \_\_\_\_\_ Recreation Dept.

**Office use only:** Application Received on: \_\_\_\_/\_\_\_\_/\_\_\_\_ By: \_\_\_\_\_  
Application approved denied on: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Applicant contacted on: \_\_\_\_/\_\_\_\_/\_\_\_\_ by: phone email mail  
Second contact on: \_\_\_\_/\_\_\_\_/\_\_\_\_ by: phone email mail  
Payment by: cash check money order Application withdrawn: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Amount Paid \$ \_\_\_\_\_ Date Paid \_\_\_\_/\_\_\_\_/\_\_\_\_