North Carolina Pecan Harvest Festival
Saturday, November 2, 2019
Food Vendor Application

Name of Vendor: ___________________________________________________________________
Address: _________________________________________________________________________
Telephone: ________________________________ Alternate: _______________________________
Email:  ___________________________________________________________________________
Description of food item(s):  __________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Number of electric hookups requested: ______

Columbus Co. Health Dept. Food Permit Fee:  
    _____ Required   _____ Not Required
$75 Fee:  _____ Enclosed   _____ Not Enclosed
Make check payable to Columbus County Health Department.

NC Pecan Harvest Festival amount enclosed: _________
($250 fee; minimum deposit of $100 required with application)
Make check payable to NC Pecan Harvest Festival.

Deadline for applications:  **October 14, 2019**  Mail application, check(s), and completed Temporary
Food Service Permit to:

    NC Pecan Harvest Festival
    PO Box 1321
    Whiteville, NC 28472

*The NC Pecan Harvest Festival Committee will not be responsible for stolen or damaged goods prior to
or during the festival.*

Printed Name of Person Responsible for Exhibit  Signature of Person Responsible for Exhibit