

Instructions for Completing the Seafood & Produce Permit Application Form

1. **Application Permit No.:** This is to be completed by MDOT SHA personnel only.
2. **District No.:** This is the district (1 thru 7) in which the work will be performed.
3. **Date:** The date that the application is submitted. This blank is to be completed by MSHA personnel only.

SECTION I – TYPE OF PERMIT REQUEST

4. **Type of Permit Request: (Check the boxes that apply)** Check the box adjacent to the type of permit (Seafood, Produce or both). Also check the box if only the entrance will be on MDOT SHA Property/Right-of-Way OR if both the entrance AND the Vendor's Facilities will be on MDOT SHA Property/Right-of-Way.
5. **Produce Vendor Permit:** If the permit requested is to sell produce.
6. **Seafood Vendor Permit:** If the permit requested is to sell seafood.
7. **Access (Entrance) Only:** If only the entrance will be on MDOT SHA Property/Right-of-Way
8. **Both Access & Facility Operations on MDOT SHA Property/Right-of-Way:** If both the entrance AND any facilities (Parking Area, Truck, Trailer, Tent, Canopy, Stand, Other) the Vendor requires to conduct business that will be on MDOT SHA Property/Right-of-Way.
NOTE: Parking for patrons are considered part of the Vendor's Operational Facilities.

SECTION II – VENDOR INFORMATION

9. **Business Name:** The complete name of the Vendor's Business, if any.
10. **Contact (Name):** The name should be the on-site contact person, if a business, or the name of the vendor.
- 10-13 **Address:** The address should be the "home office", if a business, or the home address of the vendor.
14. **Email:** The email address should be the "home office", if a business or the home email of the vendor.
15. **Cell No.:** The cell phone number should be the on-site contact person, if a business, or the cell phone number of the vendor.
16. **Office/Home No.:** The telephone number should be the "home office", if a business, or the home telephone number of the vendor.
17. **Tax or Business ID #:** Enter the Business Identification Number, if a business, or Taxi Identification Number for the vendor.

SECTION III – LOCATION & DESCRIPTION OF FACILITIES UNDER PERMIT

A. LOCATION OF SITE

18. **MSHA Route No.:** The number of the state route where the site is located.
19. **Also known as (street name):** If applicable, the name of the street(s) where the site is located.
20. **Location Seafood/Produce.** Shall be identified as a distance and direction from a cross street.

Example of 17-20: MSHA Route #: MD 175 Also known as (street name): Annapolis Road
0.25 feet/mile(s) South from 2nd Street

21. **County:** The county in which the site is located.

B. DESCRIPTION OF FACILITIES

22. **(The means by which the vendor intends to sell or offer for sale seafood/produce):** Identify WHAT the vendor intends to use to display and sell the seafood and/or produce. (Check all that apply).
23. **Truck/Trailer/ etc.:** Check box if using a vehicle or other conveyance.
24. **Temporary or Roadside Stand:** Check box if using a temporary or roadside stand including table(s), tents, canopy, etc.
25. **Roadside Market:** Check box if using a structure used for temporary markets,
26. **Other (Specify):** Identify any other type of situations. Example: residences or garages.
27. **Briefly describe vendor's operations:** Provide a written summary of how patrons will access the site; park; view/buy items; re-enter traffic.
28. **Anticipated Start Date:** Identify the anticipated date that the site is to be operational.
29. **Anticipated End Date:** Identify the anticipated date that the site has been restored after vendor stops operations at the site.
30. **Hours of Operation:** Identify the times that the site will be open for business.

SECTION IV – QUESTIONS

31. **Posted Speed Limit:** State the posted speed for the road on or near where the proposed site will be located.
32. **Does the proposed site have off-road parking? (not on travel lanes, auxiliary lanes or shoulders):**
Answer YES or NO.
33. **Is the proposed site within 50 yds of any vehicular entrance or exit to a school or place of worship?:**
Answer YES or NO.
34. **Is the proposed site within 100 yards of any vehicular entrance to or exit from a shopping center?:**
Answer YES or NO.
35. **Is the proposed site located on or within 1/4 mile of an MDOT SHA Park and Ride lot?:**
Answer YES or NO.
36. **Does the access to the proposed site have adequate safe sight distance?:**
Answer YES or NO.
37. **Will the proposed site require any construction on MDOT SHA property/right-of-way?:**
Answer YES or NO.
38. **If yes, what construction will be required?:** Briefly describe what construction will be required for the site and/or access such as any excavation, paving, placement of stone, drainage pipe(s), etc.

SECTION V – CERTIFICATION

39. **Print Name:** Print the name of the authorized individual/vendor who will sign the certification.
40. **Signature:** Signature of the authorized individual/vendor.
41. **Date:** Date of signature.
42. **Telephone No.:** Telephone number of the authorized individual/vendor that signs the application.
43. **Email:** The email address of the authorized individual/vendor should be the "home office", if a business or the home email of the vendor.