

River Street Market Place Application

Name _____
Name of your RSMP Vendor Space (Business Name) _____

Address _____

Phone _____ Cell _____

Emergency Phone _____ E-Mail _____

Can you upon acceptance, submit documentation verifying your legal right to work in the US and your identity?

Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, give details and explain (Attach a separate sheet of paper if necessary).

A conviction will not necessarily disqualify your application.

Have you ever been convicted of a felony and are now under a first offender treatment? Yes _____ No _____

Are you over the age of 18 years old? Yes _____ No _____

Do you operate any other businesses? _____

Name and address of other business _____

How many Years? _____

Detailed description of items you wish to sell: _____

You will not be able to sell any items not on your list and pre-approved.

Please give a business reference:

Name _____

Phone _____

Please give a bank reference:

Name of bank _____

Contact person _____

Phone _____

Your signature below indicates that the information given on this application is true and accurate.

Signature _____

Date _____

Size of space you are interested in:

_____ 5' x 10' _____ 10' x 10' _____ 5' x 15' _____ 5' x 5'

FOR OFFICE USE ONLY

Vendor Space # _____ Renewal Date _____ Other _____

Return application to:

River Market Group, LLC
22 West Bryan Street Suite 219
Savannah, Georgia 31401

www.RiverStreetMarketPlace.com
Traci O'Donoghue (912) 220-9101
Fax (912) 944-2470