River Street Market Landing Application

Name:
Name of your RSML Vendor Space (Business Name):
Address:
Phone:Cell:
Emergency Phone:Email:
Can you upon acceptance submit documentation verifying your legal right to work in the US and your identity?yesno
Have you ever been convicted of a felony?yesno
If yes, give details and explain
(A conviction will not necessarily disqualify your application).
Have you ever been convicted of a felony and are now under a first offender treatment?yesno
Are you over the age of 18?yesno
Do you operate any other businesses?yesno Name & 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:
Your signature below indicates that the information given on this application is true and correct.
Signature: Date:

Size of space yo	u are interested in:				
5' x 10'	10' x 10'	5' x 15'	5' x 5'		
3 × 10	10 × 10	3 ^ 13			
FOR OFFICE LISE ONLY					
FOR OFFICE USE ONLY					
Ι ,	/	Davis al Davis	Out.		
,	Vendor Space #	Renewal Date	e Other		

Return Application to:

River Street Market Landing, LLC PO Box 9941 Savannah, GA 31412

www.riverstreetmarketplace.com

Mark Halliday, Manager 912.629.2647