





**City of Grand Rapids  
Affidavit and Indemnity Agreement  
Downtown Vending Company**

**Applicants must complete and sign the below affidavit.**

**AFFIDAVIT**

- I, \_\_\_\_\_,  
am the owner of \_\_\_\_\_, a Downtown  
Vending Company (the “Company”)
- I am the legal owner of, or hold a controlling ownership interest in, the Company
- I am, or my co-owner(s) and I are, ultimately responsible for all hiring, firing, and  
disciplinary decisions of all persons employed by the Company
- If a partial owner of the Company, I have been authorized by my co-owner(s) to  
execute this Affidavit and enter into this Indemnity Agreement with the City of  
Grand Rapids on the Company’s behalf.

**INDEMNITY AGREEMENT**

In exchange for a license to operate as a Downtown Vending Company under Title III, Chapter 46 of the City Code of the City of Grand Rapids, I agree the Company

- Will be held accountable for the actions of any and all persons within its employ, so long as those actions are taken within the scope of said person’s employment
- Will hold harmless and indemnify the City, any special service districts and their officers and employees for any claims for damage to property or injury to persons which may occur as a result of any activity carried on under the terms of the license.

I understand that I am certifying that these statements are true, and acknowledge that the information contained herein may subject me to certain penalties which include, but are not limited to, suspension or revocation of my Downtown Vending Company license.

Owner’s Name: \_\_\_\_\_

Owner’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# City of Grand Rapids

## Business License Application – Part II



**This form must be submitted with all license applications.  
Applicants are required to read and initial all sections below.**

Business Name: \_\_\_\_\_

I fully understand and have completed Part I of the application, and have read the appropriate ordinances for the license category I am applying for. I have completed the application myself or with the assistance of an interpreter, if applicable.

Initials\_\_\_\_\_

I understand that all fees are non-refundable and cover the cost of processing the application.

Initials\_\_\_\_\_

I understand the license year applicable to all licenses shall begin on July 1<sup>st</sup> of each year and shall end on June 30<sup>th</sup> of the following year.

Initials \_\_\_\_\_

I understand that licensing fees are not pro-rated for a partial licensing year.

Initials\_\_\_\_\_

I understand that failure to disclose complete and accurate information is falsification of application. This is sufficient cause for immediate denial or revocation of a license.

Initials\_\_\_\_\_

I understand that other departments needing to make a recommendation on my application may require an inspection.

Initials\_\_\_\_\_

I understand the business property must have the proper zoning classification before a license can be issued.

Initials\_\_\_\_\_

I understand that a business license is issued to a specific business at a specific location and cannot be transferred to a new owner or new location.

Initials\_\_\_\_\_

If a license is denied, I understand I must file an appeal in writing to the City Clerk's Office, 300 Monroe Avenue NW, Grand Rapids, MI 49503, within 10 days of notification of the denial.

Initials\_\_\_\_\_

I understand that if I do not renew my license in June, there will be late fees and/or penalties assessed up to and including a civil misdemeanor.

Initials\_\_\_\_\_

I understand that I will not be able to claim 100% Principal Residence Exemption if I am making my home or part of my home available for rental.

Initials \_\_\_\_\_

If an interpreter was used, please provide their name and number below.

\_\_\_\_\_  
Name of interpreter (printed)

\_\_\_\_\_  
phone number