



Vendor Application

Thank you for your interest in becoming a vendor at Vendors Mall. Please complete this application in full and email it to vendors@vendors-mall.com. We will review your information and booth requirements.

Vendor Information

Vendor Name	
Business Name (if applicable)	
Phone Number	
Email Address	
Mailing Address	
City / State / Zip	City: _____ State: _____ Zip: _____

Vendors Information

Type of Business	<input type="checkbox"/> Retail <input type="checkbox"/> Handmade Goods <input type="checkbox"/> Boutique/Fashion <input type="checkbox"/> Antiques/Vintage <input type="checkbox"/> Home Décor <input type="checkbox"/> Beauty Products <input type="checkbox"/> Collectibles <input type="checkbox"/> Electronics <input type="checkbox"/> Jewelry <input type="checkbox"/> Prepackaged Food Products <input type="checkbox"/> Other: _____
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Product Information



Product Description	_____

Booth Space Requested

Preferred Booth Size	<input type="checkbox"/> 5 x 5 <input type="checkbox"/> 5 x 6 <input type="checkbox"/> 5 x 10 <input type="checkbox"/> 8 x 10 <input type="checkbox"/> 10 x 10 <input type="checkbox"/> Custom Space Request
Preferred Move-In Date	

Vendor's Registration Requirements

Initials	Please initial each statement below to confirm your understanding of the vendor's requirements.
	<p>I understand that it is my responsibility to comply with all applicable federal, state, county, and local laws, regulations, permits, licenses, and codes.</p> <p>I further understand that, as a vendor with Vendors Mall, I am required to maintain a valid Sales and Use Tax Permit for the entire duration of my vendor agreement.</p>
	<p>I understand that it is my responsibility to comply with all applicable federal, state, county, and local laws, regulations, permits, licenses.</p> <p>I further understand that, as a vendor with Vendors Mall, I am required to maintain a valid NAICS Code for the entire duration of my vendor agreement.</p>
	<p>I understand that it is my responsibility to comply with all applicable federal, state, county, and local laws, regulations, permits, licenses, health codes, labeling requirements, and food safety guidelines related to the sale of food products.</p>



I certify that any food products sold at Vendors Mall will meet all requirements established by the State of Texas, local county health departments, and any other governing agencies applicable to my business operations.

I understand that Vendors Mall is not responsible for obtaining permits, licenses, inspections, certifications, or approvals required for my food-related business activities.

I further understand that failure to remain compliant with applicable laws and regulations may result in the suspension or termination of my vendor agreement.

Vendor's Requirements

	Vendors Mall uses a centralized checkout system.
	All items must be properly tagged with a price, booth number, and brief description.
	Vendors Mall does not guarantee sales or customer traffic.
	Vendors are responsible for keeping their booth spaces clean and organized.
	Booth rent must be paid according to the terms of the agreement.
	Vendors Mall reserves the right to approve or deny vendor applications.

Food and Beverage Vendors

Do you plan to sell any food or beverage products?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe the products	
Will any products be:	<input type="checkbox"/> Opened <input type="checkbox"/> Prepared on-site <input type="checkbox"/> Intended for immediate consumption

I understand as a vendor all Food Handler Permit and Training Certificate are required.



Social Media and Website (Optional)

Facebook	
Instagram	
Website	

Emergency Contact

Name	
Phone Number	
Relationship	

Agreement

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that submitting this application does not guarantee vendor approval or booth placement.

Email the application to vendors@vendors-mall.com

Thank you for your interest in joining Vendors Mall.

Vendor Signature	
Date	

Office Use Only

Application Approved	<input type="checkbox"/> Yes <input type="checkbox"/> No
Booth Assigned	
Move-In Date	



VENDORS MALL
BRINGING VENDORS AND CUSTOMERS TOGETHER

Lease Signed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Notes	