

Fair Dates: February 12- 21, 2016 Phone 760.863.8247 Toll Free: 800.811.8247 Fax: 760.863.8973 www.datefest.org

FOOD / BEVERAGE CONCESSIONAIRE SPACE APPLICATION

\$25 Non Refundable Application Fee per application Application Deadline: Monday, August 3rd, 2015

APPLICATION INSTRUCTIONS

Please review the application instructions below carefully before completing application. This application is neither an offer nor a guarantee of space. All questions on this application must be answered completely. Be sure the information you give is accurate, as it will be the sole representation of your business for the selection process.

APPLICATION FEES

Make checks payable to: Riverside County Fair.

\$25 Application fee must be paid in the form of check, cashier's check or money order. NO CASH. If you are applying for more than one space location; you must submit a separate application and a \$25 application fee for each.

PHOTO REQUIREMENTS

Please attach a current photo of your proposed concession stand in operational form. Food Trucks, Catering Trucks and Food Tents are not permitted. Photos will not be returned.

MENU REQUIREMENTS

Please attach a menu of proposed menu sale items including prices. The menu items you are requesting to sell must be specific. If a contract is issued, it will be assigned on the basis of this list only, so please be thorough. The Riverside County Fair reserves the right to select the items a vendor is allowed to sell. Only approved items will be listed on your contract.

LOCATIONS

If a contract is issued, the location of your concession space will be determined by management. Locations are subject to change year to year.

OTHER REQUIRMENTS

Incomplete applications will not be considered or returned to the applicant.

- Please be sure to provide a valid email address that you would like all of your correspondence sent. All contract agreements, documents and correspondence will be sent via email.
- \checkmark Make sure you sign the application where indicated
- \checkmark A copy of your California Seller's Permit is required with your application

SUBMIT YOUR APPLICATION

We only accept concessions applications by mail.

Riverside County Fair & National Date Festival Fairgrounds

Attn: Commercial & Concessions Office, 82-503 Hwy 111, Indio, CA 92201

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|------------------------------------|---------------------|---|----------------------------|----------|
| | | | OFFICE | USE ONLY |
| | RIVERSIDE COUNTY | ir | F.16 GR Guarantee \$ | @% |
| | & National D | ate Féstival | e. | |
| Fai Phone 760.863.8247 T | | 1ary 12- 21, 20 | | st.org |
| | efundable Appl | ONAIRE SPA ication Fee per ap londay, August 3 rd , 2 | plication | CATION |
| PL | EASE TYPE OR PR | INT CLEARLY IN INI | Χ. | |
| Please Check One | New Appl | licant 🗌 Return | ing Concessi | onaire |
| | Have you ever par | rticipated at this Fai | r? YES | NO |
| Business Type Sole Prop | rietorship | Partnership | Corpora | tion |
| Email Address Required | | | | |
| | | | | |
| Contract Signing Authority | | Onsite Contact Nan | ne | |
| | l | | | |
| Business Name | | dba | | |
| | | | | 1 |
| Mailing Address | City | | State | Zip |
| Business Phone | | Resident Phone | | |
| Cell Phone | | Fax Number | | |

STATE BOARD OF EQUALIZATION

All vendors are responsible for payments for all applicable sales taxes and MUST obtain a California State resale tax permit number. Out of state vendors must obtain this permit prior to the Fair. This permit number must be on file in the Commercial/Concessions Office prior to start of Fair. Applications are available online at <u>www.BOE.CA.GOV</u> or you may call 760.770.4828 The State Board of Equalization will not issue permits on site. For new applicants - if you do not have one; you may wait to be accepted to obtain one.

CONCESSION STAND SIZE

Please attach a current photo of your proposed concession stand in operational form. Food Trucks, Catering Trucks and Food Tents are not permitted. Photos will not be returned.

| Size of Space Needed | | Size of Stand | | | |
|--|----------------------|-------------------------------|-------------------------|--|--|
| Ground measurements, including storage area & overhead awnings | | Including tongue / hitch | | | |
| | | | | | |
| Width Length | | Width | Length | | |
| Additional Space Needed for Awnings | | Service From | Satellite Counter Space | | |
| | | End Serve Side Serve | Yes No | | |
| Ends | Sides | | Size | | |
| Electrical Requirements | | Additional Utilities Required | | | |
| | | | | | |
| Volts | Amps | Water | Sewer | | |
| | | | | | |
| CASH REGISTERS | | | | | |
| Please list all cash register serial numbers | | | | | |
| Cash Register | Cash Register Cash R | egister Cash Register | r Cash Register | | |
| | | | | | |

INSURANCE REQUIREMENTS

Please select the form of insurance you will provide during the Fair. Each vendor must provide the Concessions Office with proof of general liability insurance of no less than \$1,000,000. Each vendor who hires employees must also provide a copy of worker's compensation insurance.

VENDORS PROVIDING PROOF OF INSURANCE

Name of insured business must match business name on this application.

Insurance certificate should name as additional insured:

The County of Riverside; and The Riverside County Fair & National Date Festival; and Riverside County Economic Development Agency; and their officers, agents, employees and servants individually and collectively, as regards to all operations on or on behalf of name insured and all premises or property used by on or on behalf of named insured.

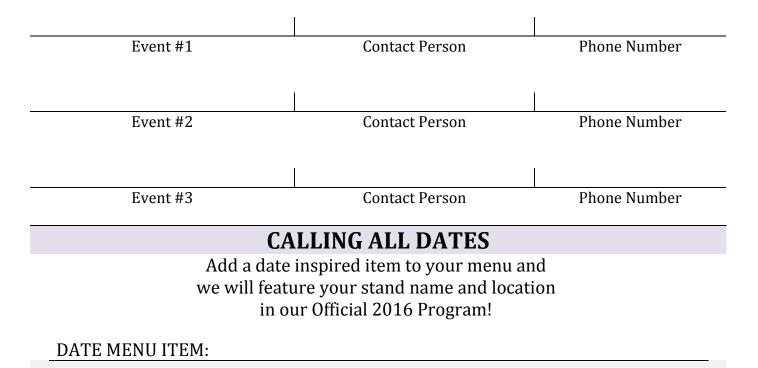
| | My Own Carrier | Name | CFSA Master List | Master List # |
|------------------------------|-----------------|--------------------------------|------------------------|-------------------------------|
| VENDORS PURCHASING INSURANCE | | | | |
| | I would like to | purchase CFSA Insurance | You will be billed \$ | 5185 if accepted as a vendor |
| \checkmark | Completing this | form does not constitute proof | of insurance. Proof of | of insurance will be required |

| \checkmark | Completing this form does not constitute proof of insurance. Proof of insurance will be required |
|--------------|---|
| | once a contract has been issued. Insurance must be on file by Monday, February 1st, 2016 . |
| ✓ | Vendors without current insurance on file will not be allowed to set up. NO EXCEPTIONS! |

✓ ADA (Americans with Disabilities Act) You must comply with the Americans with Disabilities Act ("ADA") of 1990, (42 U.S. C. 12101 et seq.) which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA.

REFERENCES

Please provide three (3) references for other fairs, festivals or events in which you have participated. Please include a contact name and telephone number for all references.



✓ Do not forget to attach a full menu of proposed sale items including prices. Refer to Page 1

CERTIFICATION OF APPLICANT

I certify all information contained in this application to be true and accurate. I understand that this application in no way implies or guarantees that space will be offered. The Riverside County Fair & National Date Festival reserves the right to refuse any application and may refuse to execute a contract without giving reason for same or to relocate a concessionaire at any time for the betterment of the Fair. I understand that if awarded a contract, I will be required to participate and operate my concession stand in compliance with Fair hours of operation beginning Friday, February 12th through Sunday, February 21st, 2016. I have read and understand the instructions and additional information attached.

Sign & Date

Print Name & Date