



Saturday July 15h 2017 / Hours: 11am to 6:00 p.m.

Vendor Contract

FILL IN COMPLETELY & PRINT CLEARLY

Owner Name: _____

Business Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

TAX ID Number: _____

Email: _____

Please provide a detailed menu of your products and prices:

I have a Tent → dimensions: x x

I need a Tent

I have a trailer → dimensions: x x

Please tell us what side the hitch is on and what side you "sell from":

Electrical Requirements (Voltage and Amperage): If you have specific electrical needs above and beyond the basic provisions below, you MUST advise us.

I have read & understood the electrical provisions below

I have specific electrical needs → please explain:
.....

2017 Fees

Site Rent:

Food Vendor Category 1 (restaurant site): \$ 1,250.00

Food Vendor Category 2 (8ft x 8ft tent site or food truck) : \$250.00

Artist corner: \$ 125.00

Merchant Vendor: \$ 250.00

Sponsor: \$ 500, \$ 1000, \$ 2000

Tent rental (includes one 8ft x 8ft tent, 1 table and 2 chairs): please contact us.

\$ 110 / tent + equipment.

Health License Fee: \$ 25.00 (Jersey City Businesses need not apply, but must include a copy of their current license with their signed contract)

Fire License Fee (if using an "open flame"): \$ 125.00 (waived if holding current JC Food License)

Food Vendors:

If you are using an open flame unit or sterno's, the **Jersey City Fire Department** requires a fire license. We will secure this for you; the cost is **\$125.00 per open flame unit.** (*Electrical Appliances do NOT count*)

The city also requires that if you are selling any type of edible product, you secure a **Health License.** We will secure this for you; the cost is **\$25.00.**

Electrical Requirements:

Please bring your own quiet generator, or notify us of any special power needs you may have. Additional Fee applies will apply. PLEASE CONTACT US AHEAD OF TIME.

Your Rent/Fees

Site Rent: \$ _____

Electrical Fee: \$ _____

Health License: \$ _____

Tent rental: \$ _____

Fire License: \$ _____

Deposit: \$ _____

Received by: _____

Balance Due: \$ _____

Balance Due Date: _____

Total Due by June 1, 2017: \$ _____

Please read the following points carefully.

1. A non-refundable rent deposit of \$200.00 plus ALL additional fees is required upon execution of this contract.
2. Please make all checks payable to FAA Jersey City.
3. Balance is to be paid in full on or before **Friday, June 30th, 2017.** If your balance is not paid by this date you WILL lose your spot.

Should you have any questions please call office at 201-338-8320 # 200

Accepted & Approved by:

Vendor Signature: _____ Date: _____

Organizers Signature: _____ Date: _____