



APPLICATION FOR VENDOR SPACE
2017 OLDE FASHIONED CHRISTMAS
OUTDOORS—Downtown Palisade
SATURDAY, DECEMBER 2nd 2017

Company: _____

Contact Name: _____

Address: _____ City, State, Zip: _____

Telephone: _____ Cell Phone: _____

E-mail: _____ Website: _____

(FOOD VENDORS MUST SUPPLY COPY OF INSURANCE, LICENSE, & COPY OF MC APPROVAL LETTER)

Description of products sold (please provide pictures of booth and products. **Applications will not be accepted incomplete**

Special Request (s):

DEADLINE FOR APPLICATION is November 13th, 2017

COST

AMOUNT PAID

Booth Cost (10 X 10 SPACE) **(OUTSIDE)**

\$ 65.00

Booth Cost (10 x 20 SPACE)

\$120.00

Electricity (LIMITED TO SPECIFIC AREAS OUTSIDE

\$ 15.00

Palisade Special Event License *

\$ 10.00

*Please Provide License # if applicable: _____

*Must provide your own booth amenities (tables, chairs, tent, rug, etc.)

Total Enclosed Absolutely no refunds after November 13th, 2017

FOR OFFICE USE ONLY:

MAIL COMPLETED APPLICATIONS ANY LICENSING OR INSURANCE FORMS AND

Date Received _____

MAKE CHECK PAYABLE TO PALISADE CHAMBER OF COMMERCE

Check # _____

Palisade Chamber of Commerce

Amount _____

PO Box 729

Accepted _____

Palisade, CO 81526

Denied _____

970.464.7458 Fax 970.464.4757

Date Returned _____ Check # _____

E-mail linda@palisadecoc.com



Palisade Olde Fashioned Christmas

December 2nd, 2017

RULES & REGULATIONS/GENERAL INFORMATION

BOOTHS -

Booth Spaces & Logistics - 10' x 10' or 10' x 20' booth sizes are available at the 2017 Olde Fashioned Christmas Outdoors. Vendor is responsible for any and all items needed for the booth, including, but not limited to, tables, chairs, e-z up, etc.

ELECTRICITY IS ALLOTTED TO ONLY SPACES 1-6 AND 19-23 AND IS ON A FIRST COME FIRST SERVE BASIS.

FOOD VENDORS -

Food Service License/ID # - A Colorado Health Department Food Service License/ID # is required to serve the public. A 2017 Copy of Certificate must be submitted with application in order for **food vendors** to be considered. Your certificate must be clearly displayed in your booth. *(The Colorado Department of Health will be on-site during the Olde Fashioned Christmas)*

Proof of Insurance - All food vendors are required to include proof of (*minimum*) \$1,000,000 coverage, specifically naming 2017 Palisade Chamber of Commerce.

Food Vendor Location & Regulations - There is to be **ABSOLUTELY NO DUMPING** of grease or any other hot liquid, or any water containing grease or other harmful ingredients.

SET-UP & TEAR-DOWN

Set-up will be Saturday, December 2nd, 2017 between 8:00 am - 9:30 am. Tear-down will be between 4:00 pm - 5:15 pm. The start time for the marketplace will be 10:00 a.m. **All vehicles must be removed from the marketplace area before this time.** You must be signed in by the opening of the marketplace for check-in. There will be **NO** late arrivals allowed.

RELEASE-

All vendors agree to waive any/all rights to any photos or images taken during the 2017 Palisade Olde Fashioned Christmas.

SALES TAX -

You must pay all applicable taxes due to the State of Colorado. The Palisade Chamber of Commerce, Olde Fashioned Christmas or the Town of Palisade will not accept payment for any sales tax. All participating vendors' names and addresses will be reported to the Colorado Department of Revenue after the Olde Fashioned Christmas. Please make sure you have your State Sales tax license with you at the marketplace.

TRASH -

All vendors are responsible for and required to keep their booth area free of trash, paper or refuse of any kind.

DISCLAIMER -

All property taken into the Olde Fashioned Christmas marketplace by the vendor is done at the vendors' own risk. The Palisade Chamber of Commerce, Palisade Olde Fashioned Christmas and Town of Palisade or any entity providing services for or to the afore mentioned, shall not be held responsible for any loss due to damage from fire, theft, windstorm, or any other cause. The marketplace does not take responsibility for actions on vendor's parts that result in officers of the low or any governmental agency seizing property or stopping or preventing vendor from operating.

Please sign this form and return with Vendor Application to: Palisade Chamber of Commerce, PO Box 729, Palisade, CO 81526

Vendor Name: _____

Signature: _____

Date: _____