



2017 Summer Schedule

THURSDAY Nights

5 – 9:30 p.m.

July 6, July 20, August 3, August 17

Rain Date August 24

MAIN STREET Patchogue, NY

Food Vendor Application

Fee:

Application and the listed additionally requested items must be RECEIVED BY THE CHAMBER By: **5:00 PM Thursday, June 1, 2017.**

Full payment and DOH Permit due upon Committee approval, **NO PAYMENTS WILL BE PROCESSED UNTIL COMMITTEE APPROVAL OF APPLICATION.**

Limited to **one Truck Trailer or Stick Stand** per Vendor.

Regular Vendor Price:

\$675.00 Non-Chamber Members

\$525.00 Chamber Members

Priority Placement, \$175.00 additional

Priority Placement- guarantees approved Food Vendors of the event a specific location of their choosing with in areas designated food Vendor Locations. Priority Placement **DOES NOT** guarantee application approval.

PLEASE SEND:

1. Completed application.
2. Copy of your resale sales tax certificate
3. Certificate of Liability Insurance minimum \$1million coverage naming: The Greater Patchogue Chamber of Commerce Inc. & The Greater Patchogue Foundation as additionally Insured, 15 North Ocean Ave, Patchogue, NY 11772.
4. Copy of your approved annual or temporary DOH Permit (required upon acceptance into festival)
5. A picture of your Vehicle

MAIL TO: The Greater Patchogue Chamber of Commerce, Inc.
15 North Ocean Ave, Patchogue, NY 11772

Questions: info@patchogue.com Chamber office 631- 207-1000

Department of Health – Obtain your DOH permit immediately and mail an approved copy to us by **June 19, 2017.**

Application Review process will begin immediately after June 1st. All vendors will be contacted with results. Approved vendor payment must be received in full **by: Thursday, June 23, 2017** in order to receive spot #s and event passes.

Vendors are responsible for keeping their area clean. All trash & Boxes are to be taken with you. **No refuse is to be left on the street, on the curb, or in receptacles on the sidewalk. No electric service.** No refunds due to inclement weather or dissatisfaction of spot placement. Price must be posted large enough so customers on line can see prices.

REGISTRATION & FEES: Limited to one Truck Trailer or Stand per Vendor.

BUSINESS NAME (Print): _____ **PHONE:** _____

ADDRESS: (Print) _____

CITY: _____ **State:** _____ **ZIP:** _____

Resale Certificate # _____ ****PLEASE ENCLOSE A COPY****

EXACT FOOD ITEMS SOLD: (Print, if you don't list it you might not be able to sell it)

TOTAL LENGTH OF TRUCK _____ **(Please be Accurate)**

TOTAL LENGTH OF TRAILER INCLUDING TONGUE! _____ **(Please be Accurate)**

SIDE OF VEHICLE SERVICE WINDOW IS ON (Circle One)? Drivers Side Passenger Side

NUMBER OF 10'X 10' SPOTS (include length of tongue) _____ **AMT ENCLOSED: \$** _____

Please return this application with All Additionally requested paperwork by **June 3, 2016**. – Balance cutoff due upon acceptance into the event.

Please Enclose your Certificate of Insurance as specified on the information sheet.

*Suffolk County Department of health Approved permits must be submitted to us by **June 20, 2016**.

Questions: info@patchogue.com Chamber office: 631-207-1000

Set up: 3:30PM to 4:30 PM sharp Failure to arrive for setup during the allotted time may result in your inability to participate in that evenings event. No Refund will be given in this situation.

No selling after 9:15 pm. All vehicles must be off the street by 10:30PM. No Exceptions. If you do not comply, you will be asked not to return and lose the fee already paid!!! No refunds due to inclement weather.

I understand and agree that the Greater Patchogue Chamber of Commerce, Inc. and all volunteers and their legal representatives will not be held liable for any damage to my property and/or person. I understand and agree that I alone am responsible for my property and person at all times at the Alive After Five®. I understand and agree that the Greater Patchogue Chamber of Commerce, Inc. retains the right to prohibit any sale by any vendor at its absolute discretion.

I have read the attached Food Vendor Information Sheet & agree to comply with all rules & regulations.

SIGNATURE: _____

Print: _____

CELL PHONE: _____

EMAIL: _____