

EVENT VENDOR REQUIREMENTS

By submitting a vendor application for a Town of Apple Valley special event, you acknowledge that you have read and agree to abide by all requirements provided on this form as well as on specific event applications and other information provided by the Town. **Health and Fire Department representatives may be present at every event.** They will deny permission to set up for any vendors failing to comply with any of the health and fire requirements below.

Vendors who fail to comply with any of the conditions herein are subject to removal from the area without a refund of vendor fees and may not be invited to participate in future events.

VENDOR ACCEPTANCE POLICIES

Vendor selection is on a first come first serve basis.

No vendor is guaranteed exclusively for an item. Additionally, previous agreements with sponsors may limit what vendors can sell.

A specific space cannot be guaranteed. Spaces are assigned to maximize traffic flow, avoid placing similar items together and meet vendor needs for access, electricity, fire & health department requirements and other factors. The Town will try to meet requests for a specific space, however, it cannot be guaranteed.

If your business/organization is a “no show”, without prior notification, you may not be allowed to participate in future events.

NO VENDER FEE REFUNDS for no shows or cancellations within 30 days of the event.

FIRE & HEALTH DEPARTMENT REQUIREMENTS

1. **Fire Extinguishers:** All vendors must have one (1) 2:A10:BC minimum rating fire extinguisher, currently serviced and tagged by a certified, licensed California company and easily accessible.
2. **All canopies** must be composed of flame-resistant material or shall be treated with a flame retardant in an approved manner. All canopies must have a permanently affixed California Marshal label attesting to such. The Apple Valley Fire Protection District may have staff at the event assuring all vendors are in compliance prior to setting up. If you fail to comply, you will not be allowed to set-up.
3. All cooking vendors must have “**No Smoking**” signs posted in an obvious place.
4. Tents used for cooking shall be separated from other tents and canopies by a minimum of 20 feet.
5. **LP-Gas containers** shall be located outside tents and canopies and separated by a minimum of 5 feet.
6. **Generators** and other internal combustion power sources shall be separated from temporary tents and canopies by a minimum of 20 feet and be isolated from contact with the public by fencing, enclosure or other approved means.
7. All food vendors must have use of a **hand washing facility**, which is defined as a portable pressurized sink with hot/cold running water. Each vendor must have liquid soap and paper towels readily available. Those vendors without a two compartment portable sink with pressurized hot and cold running water may share with another vendor that is fully equipped. No more than three vendors may share one sink.

SEE SECOND PAGE FOR ADDITIONAL REQUIREMENTS

Revised June 30, 2015

If you have any questions contact Christie Gonzales, Pet Fair Coordinator, at (760) 240-7000 ext. 7555.

EVENT VENDOR REQUIREMENTS

TOWN REQUIREMENTS

1. No smoking is permitted in any Town of Apple Valley park.
2. Additional information such as types of vendors, vendor parking, access, etc. may vary from event to event, and can be found on the individual event application.
3. All vendor spaces must be paid in full two months prior to each event in order to guarantee your space.
4. All fees are **NON-REFUNDABLE** with less than 30 days cancellation prior to an event.
5. **No vendor is guaranteed exclusivity for an item.**
6. **A specific space cannot be guaranteed.** Spaces are assigned to maximize traffic flow, avoid placing similar items together and meet vendor needs for access, electricity, fire and health department requirements and other factors. We will try to meet requests for a specific space, however it cannot be guaranteed.
7. **Vendor booths must be completely set-up at least 30 minutes before the event begins. Vendors are required to remain set-up until the posted ending time of the event.** Visitors are still arriving towards the end of the event and lose out if vendors take down their booths early. We are trying to avoid this. Please comply.
8. All booths and merchandise must be maintained in good condition, in good taste, and appropriate for family viewing.
9. Animal Services staff reserves the right to order the removal of any displayed items deemed inappropriate, disruptive, or hazardous.
10. Vendors may operate only one type of booth (i.e., one vendor can't rent 2 separate booths selling the same item.)
11. Food vendors must have satisfactory rating with the Health Department.
12. Vendors who operate a business in the Town of Apple Valley, or participate as a vendor in three or more Town events, must get a Town of Apple Valley business license. For more information call (760) 240-7000 x 7707.
13. The **State Board of Equalization** requires you to possess a resale number.

BOOTH APPEARANCE & OPERATION

1. Vendors using electricity must provide their own extension cords and/or power source, if power is not readily available near your space.
2. Vendors that need access to water must provide their own hose although access cannot be guaranteed.
3. Booths shall have professional looking signs. Handwritten signage is not permitted.
4. Booth operators must be 18 years of age or older.
5. Vendors may not conduct business outside their booth space or by walking about the event.
6. Vendors may not change menus or vary items sold from those listed on the application without prior approval.
7. All vendors must have an EZ-Up type canopy (no makeshift tenting or swap meet style booths.)
8. All extra product and supplies stored in the booth shall be covered or screened from view.
9. All tables must have skirting of tablecloths.
10. Vendors bringing personal pets must keep pets in the booth, safe (water/shade) & maintain a clean environment.



TOWN OF APPLE VALLEY – ANIMAL SERVICES DEPARTMENT
PET FAIR Vendor Application - October 20, 2018

Paperwork & payment due no later than 8/31/18

PLEASE PRINT ** Complete ENTIRE form** INCLUDING EZ-UP SIZE **

Phone Number: _____

Applicant Name: _____ Email: _____

Business or Organization Name (if any) _____

Mailing Address: _____ City _____ Zip _____

Town of Apple Valley Business License Number: _____
(Required if you operate a business in Apple Valley, or will be participating in three or more Town Events)

Resale Number: _____ (Do not submit this application without your number)
To obtain your resale number free of charge, call the State Board of Equalization at (800) 400-7115.

NON-PROFIT (501c3) TAX ID # (if applicable): _____

Booth Type: Circle booth type/cost in the chart below. Some items are excluded due to contract.

Table with 3 columns: Booth types: Game, food, handcrafts, Info/Svc., All Booths, Space Size Available / Provided. Rows include ARO Partner / Non Profit 501c3, Business Standard Space, and Business Upgraded Space. Includes notes on non-profit rescue partners and an additional opportunity for a \$20 passport.

Describe primary product, activity, or service to be offered: (Food booths must attach menu)

SPACE RESERVATION: IF YOUR TRAILER, CANOPY, OR DISPLAY IS BIGGER THAN 15' X 15'; OR, YOU ARE USING A BBQ GRILL, YOU WILL NEED MORE THAN ONE SPACE.

Trailer/Kitchen Dimensions: _____ EZ UP SIZE (10x10/12x12/15x15): _____ X
\$ _____ x _____ (# of spaces) = TOTAL PAYMENT DUE _____.

ELECTRICAL: Limited electrical connections available. Please advise if you will need power, we will attempt to locate your space near power hook up. If we are able to provide you with a space with electricity, you must provide your own extension cords.

** NO PARKING on the grass at any time! NO EXCEPTIONS! **

I have read and understand the Event Vendor Requirements, Vendor Acceptance Policies, and this application, and agree to abide by the rules and requirements as set forth therein, and any others that may be implemented. I understand that failure to abide may result in not being allowed to set up the day of the event or removal from the event, and may prevent my participation in future events held by the Town of Apple Valley.

Signed _____ Date _____

MAKE CHECKS PAYABLE TO: AVCRF/TOAV

Mail to: Town of Apple Valley, Attn: Christie Gonzales / Animal Services
14955 Dale Evans Parkway, Apple Valley, CA 92307 * Ph (760) 240-7000, ext. 7555 / Fax (760) 247-6487
In person: 22131 Powhatan Rd., Apple Valley, CA 92308 / Hours: 9am-4pm (Tues – Sat)

**13th Annual
PAWS n' CLAWS PET FAIR
October 20, 2018**

Liability Waiver

RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE

I (**Last, first, middle**) _____ fully understand that my participation in the Paws n' Claws Pet Fair exposes me to the risk of personal injury, death or property damage. I hereby acknowledge that I am voluntarily participating in this event/lesson and agree to assume any such risks. I understand that my participation as a vendor, clinician, demonstrator, volunteer, participant or other position involved in the execution of the Paws n' Claws Pet Fair will result in exposure to a variety of animals and other activities that occur in that environment. Photography and filming may occur during the Paws n' Claws Pet Fair. By signing below I give my consent to both photography & filming.

I hereby release, discharge and agree not to sue the Town of Apple Valley for any injury, death or damages to or loss of personal property arising out of, or in connection with, my participation in the event/class from whatever cause, including the active or passive negligence of the Town of Apple Valley or any other participants in the event/class.

In consideration for being permitted to participate in the event/class, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the Town of Apple Valley from any and all claims, demands actions or suits arising out of or in connection with my participation in the event/class.

I HAVE CAREFULLY READ THIS RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT IT IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

Date: _____

Physical Address: _____

Mailing Address: _____

Email: _____

Signature: _____ **Print:** _____

Signature of Parent/Guardian if under 18 years old: _____