



City of Sinton
Centennial Celebration
*Cook Off *Music*Food*Fun*

Ck# _____	Pd. Date _____
Tax ID # _____	Exp. Date _____
Food Handlers Permit <input type="checkbox"/>	Health Inspection <input type="checkbox"/>
Exp. Date _____	
Electricity <input type="checkbox"/>	Photos <input type="checkbox"/>

VENDOR APPLICATION

(PLEASE PRINT CLEARLY & COMPLETE IN FULL)

FOOD VENDOR
 \$50.00 fee

ARTS & CRAFT VENDOR
 \$25.00 fee

OWNER / OPERATOR _____ EMAIL _____

(All Vendors who will have other workers will also need a Criminal History Verification for each individual)

VENDOR BOOTH NAME _____

MAILING ADDRESS _____

CITY, STATE, ZIPE CODE _____

PHONE (____) _____ CELL (____) _____

PRODUCT(S) *(NOTE: You must call for approval on different items added to be sold)*
****Photos of products preferred if possible****

(Description) _____

Electricity Needed? YES NO Additional Fee: \$20.00/per 110 volt outlet

IF RQUIRED FOR YOUR CATEGORY:

- Texas Sales Tax Number _____ - _____ - _____ - _____
****A COPY of your Texas Sales Tax Certificate MUST BE INCLUDED****
- Food Handlers Permit/Certification Number _____ (San Patricio County)
****A COPY of your Food Handlers Permit/Certificate MUST BE INCLUDED****

Vendor Sale Accepted: YES NO
 Criminal History Verification completed and approved: Total approved # _____ Chief Initials _____
 Individuals Not Approved: _____

VENDOR INFORMATION & APPLICATION

Join us on October 15, 2016 as we come together and Celebrate a 100 years for the City of Sinton! From entertainment and vendors to family-friendly activities the Centennial Celebration is sure to be a crowd-pleaser.

FEES

- \$50.00 -Food Booths & Food Trucks
- \$25.00- Arts & Craft Vendor
- \$20.00/per 110 & 220 volt outlet Electricity Access
- \$35.00 – Any Returned Checks for insufficient funds or any reason plus any other applicable fees

VENDOR CATEGORIES (descriptions on the following required on application)

- Food Booths/Food Trucks – Entrée meals, snacks and dessert items (Recommended: propane powered cooking/heating devices)
- Drinks – Lemonade, Coffee, Tea, Smoothies, Snow-Cones (**no water, no soft drinks, no alcohol**)
- Artisan/Craft/Resale
- Non-Profit Organizations (Must provide Proof of Non-Profit Status with Application)

REQUIRED HOURS OF OPERATION

- Purchase of booth space is for full day. Vendors will be able to set up early and event will begin at 10am. Vendors are asked to stay until 6pm.

LOAD-IN / OUT

- **Load-In: Saturday, October 15th between 7am-9am.** Vendors will be coordinated according to registered category. All vendors will be given a permit pass to hang in vehicle for designated vendor parking..
- Vendors with More Extensive operations may be asked to setup earlier.
- **Load-Out: Saturday, October 15th AFTER 9am and must be out by 12 Midnight.**
- **SECURITY** will be assisting with crowd control and vendor's vehicles accessing the venue during break-down and load-out, exiting the venue.
- The Vendor Coordinator may contact you pending Approval of Application for any additional information.

RESTRICTIONS

- No Sales of alcoholic beverages
- No flashing lights, music, bullhorns, hawking to the crowd or profanity of any kind.
- No dumping of waste or liquids on the ground.
- No Sale of tobacco products, weapons or drug paraphernalia.
- **No Pets Allowed**
- No Signs, Banners or Display of any kind relating to alcoholic beverages, or politics.
(The Festival is for entertainment purposes only, not a political event)

ADDITIONAL REQUIREMENTS

- Vendors must remove and dump all grease and gray water to an approved container on site.
- Vendors are encouraged to use post-consumer waste products/recyclable materials.
- Vendors are responsible to ensure their space is clean and orderly before leaving.
- Vendors must sign a waiver of liability.
- Vendors must sell out of their space only and may not sublet their space or share their space.
- You are to be Respectful of other vendors waiting to park and setup.
- DO NOT SETUP until you check in with Vendor Coordinator.

- To Ensure Public Safety, setup can become a problem without your cooperation, so please unload as quickly as possible and Move Your Vehicle Out of Event Area Immediately.
- Violation of “No Parking within barricaded areas” will result in the vehicle being Towed by Law at owner’s expense.
- Any booths needing to restock items will need to walk items to their booth. Cars will not be allowed in drop off but will have designated vendor parking.
- Vendors must provide their own Canopy and ALL other gear; tables/chairs, electrical cords and tape to secure the cords, etc.
- This is a family oriented event. Please make sure all persons helping at your booth are acting in a family friendly manner.

GENERAL INFORMATION

- Trash containers are provided for your use.
- Port-o-Lets will be provided throughout the event area.
- Rain or Shine, the event will not be rescheduled or cancelled.

VIOLATION OF ANY OF THE RULES, ANY PUBLIC CONFRONTATION WITH ANOTHER VENDOR OR REPRESENTATIVE OF THE EVENTS PROFESSIONAL SERVICES, EVENTS & FESTIVALS COMMITTEE OR CITY OF SINTON STAFF, WILL RESULT IN THE TERMINATION OF YOUR APPLICATION AND AN IMMEDIATE REQUEST TO LEAVE THE PREMISES.

I HAVE READ AND UNDERSTAND THE REQUIREMENTS OF THE TEXAS COTTAGE KITCHEN FOOD LAW (HB 970) AND WILL ABIDE BY THEM. (see attached summary of bill) or go online (<http://texascottagefoodlaw.com/The-Law/HB-970-Summary>)

RELEASE / INDEMNIFICATION

By signing this application, you agree that the City Sinton Centennial Celebration is not responsible for the safety, health, or welfare of your owners, employees, family members, or other participants, nor is the City of Sinton Centennial Celebration responsible for the safety of your vehicles, booths, equipment, supplies, or property. In addition, by signing this application, you agree to indemnify, defend and hold harmless the City of Sinton from any and all claims, damages, or assertions of liability by any person or persons whatsoever, directly or indirectly, of whatever kind or nature, whether valid or not, arising out of or in any way related to your negligence or any of your activities at the City of Sinton Centennial Celebration.

Vendors Signature: _____ Date: _____

Vendors Printed Name: _____

Please submit the signed document required along with your application and payment to:

**City Hall
301 E. Market
Busi. Phone (361) 364-2381
Payments are accepted by Cash, Credit Card (in person) or
Checks made out to: Festivals & Events
Office Hours: Monday – Friday 8:00 a.m. to 4:30 p.m.**

Attention: City of Sinton Centennial Celebration

Applications are also available on-line: www.sintontexas.org

Please attach a copy of Drivers License with DPS computerized CCH verification form for each worker.

DPS Computerized Criminal History (CCH) Verification (AGENCY COPY)

I, _____, have been notified that a Computerized Criminal History (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB identifiers I supply.

Because the name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using the name and DOB method. Therefore, the agency may request that I have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (Automated Fingerprint Identification System). I have been made aware that in order to complete this process I must make an appointment with L1 Enrollment Services, submit a full and complete set of my fingerprints, request a copy be sent to the agency listed below, and pay a fee of \$24.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by your agency. Required for future DPS Audits)

Signature of Applicant or Employee

_____/_____/_____
Date

Agency Name (Please print)

Agency Representative Name (Please print)

Signature of Agency Representative

_____/_____/_____
Date

Please:	
Check and Initial each Applicable Space	
CCH Report Printed:	
YES <input type="checkbox"/>	NO <input type="checkbox"/> _____ initial
Purpose of CCH: _____	
Hire <input type="checkbox"/>	Not Hired <input type="checkbox"/> _____ initial
Date Printed: _____	_____ initial
Destroyed Date: _____	_____ initial
Retain in your files	