



## **COLFAX 2013 WINTERFEST VENDOR APPLICATION**

Dear Potential Vendor,

Our Colfax WinterFest Celebration will be held on Saturday, December 14<sup>th</sup>, 2013 from 4:00pm to 9:00pm.

**Space is limited to 30 vendors**

We thank you for your interest in our community event and we are proud to be able to keep it going. We reserve the right to cancel the event, due to inclement weather. Vendor fees will be refunded if event is canceled by the event organizers.

**STANDARD WinterFest 10' X 10' BOOTH PRICING:  
(Only money orders and cash accepted)**

**Food vendors: \$50**

*Note: we will only be accepting non-profit or vet exempt food vendors for this event.*

**General Vendors: (Non-food) \$50**

*Note: there are no refunds of booth fees upon acceptance of application.*

**PLEASE SUBMIT THE FOLLOWING WITH YOUR APPLICATION:**

- **IMPORTANT: Your application will not be accepted without the correct payment. Please provide either a money order or cash – checks will not be accepted.**
- **Copy of your liability insurance – Naming the City of Colfax, its officers, volunteers and employees as additional insured.**
- **Food vendors, please include with your application, (*see also detailed instructions on the following page*):**
  - If you'd like confirmation please include a self-addressed, stamped envelope
  - A Current Health Permit
  - Placer County Temporary Food Packet
  - Your menu, including drinks with prices for each item listed
  - A copy of your non-profit or vet exempt paperwork

Note: All non-food vendors must bring a copy of their Resale License at the State Board of Equalization, (they can be contacted at 916-227-6700, 3321 Power Inn Road, Suite 210, Sacramento, CA 95826).

**PLEASE MAIL YOUR APPLICATION & MONEY ORDER TO:**

Tammy Sumner  
PO BOX 1293  
Colfax CA 95713  
ph. 530-277-9635

**DETAILED INSTRUCTIONS**

Thank you for your interest in being a vendor in our Colfax WinterFest Celebration. The purpose of the following instructions is to address issues that have arisen in the past and/or are safety-related. Please review these instructions carefully. If you have questions regarding this application, please contact:

Tammy Sumner  
ph. 530-277-9635  
email: [tsumner@pobox.com](mailto:tsumner@pobox.com)

**INSTRUCTIONS REGARDING THE APPLICATION:**

- **ANSWER ALL QUESTIONS WELL:** All questions on the application must be answered completely. Please be sure the information you give is accurate as it will be the sole representation of your business for the selection process.
- **SUBMIT A MENU PLAN & PRICES:** Food vendors: Please submit your menu with prices for each item including drinks and drink sizes. Be specific as contracts will be issued and will be assigned on the basis of your menu only.
- **SUBMIT THE NECESSARY PLACER COUNTY FORMS:** Food vendors, you **MUST** SUBMIT PLACER COUNTY'S TEMPORARY FOOD PACKET FORMS. This can be found at their website: [http://www.placer.ca.gov/Departments/hhs/env\\_health/ConsumerProtection/RetailFood/TemporaryEvents.aspx](http://www.placer.ca.gov/Departments/hhs/env_health/ConsumerProtection/RetailFood/TemporaryEvents.aspx)

**INSTRUCTIONS REGARDING THE DAY OF THE EVENT:**

- **VENDOR PARKING:** Vendor Parking will not be reserved since the event is small. **No vendor parking in front of local businesses.**
- **NO RE-LOCATING OF BOOTHS:** Once you are assigned a space, there will be **NO** re-locating your space. If you choose to move your space after your assignment, you will be asked to leave the event and will not be invited back to future events.
- **CHECK-IN:** The check-in table will be located on Main Street and opens at 2:00 PM. Check-in no later than 3:00 PM. Please be set-up by 4:00 PM.
- **LIMIT ON 'SAME-TYPE' VENDORS:** In an effort for this to be a profitable venture for all vendors and because this is a small event, we reserve the right to limit the 'same type' food vendors to one. The chosen 'same type' food vendor will be based on the postmarks on the applications.
- **BOOTH PLACEMENT:** Booth positioning will be organized as a mix of food, crafts and merchandise. We will attempt to keep 'same type' vendors separated. Vendors cooking on-site will not be placed next to vendors selling clothing or crafts that absorb odors and/or smoke.
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- **NO EARLY DEPARTURE:** One of our goals is that every vendor leaves the end of the event with no product remaining. We understand that vendors may want to depart early if they have sold out, however, *please be aware that vehicles are no longer allowed on the blocked off or barricaded sections of Colfax' downtown.* If you do not wish to wait until the event officially ends at 9:00 p.m., please plan accordingly to get your equipment and supplies back to your vehicle via carrying and/or dollies. This is an important safety issue since there have been several near misses with pedestrians and vehicles in the past.
- **RESTRICTIONS AND MERCHANDISE SOLD:** This is a family-oriented event, we will not permit the sale of 'stink bombs', 'silly string', pornographic or other obscene material, drug paraphernalia, edged weapons or firearms. The sale or use of fireworks will not be permitted in the City of Colfax with the exception of a professional fireworks show.
- **KEEP SIDEWALKS CLEAR:** It is mandated by The City of Colfax and law enforcement that your booth space be at least 3 feet from the sidewalks and that no merchandise or anything to do with your booth space be on the sidewalks, thanks.

**VENDOR APPLICATION**

Event: Colfax 2013 WinterFest  
 Location: City of Colfax

Date of Event: Sat., December 14<sup>th</sup>, 2013  
 Time: 4:00 p.m. to 9:00 p.m.

**NOTE: Please type or print in ink.**

Name of business or organization: \_\_\_\_\_

Merchant vendor?  YES  NO      Merchandise sold: \_\_\_\_\_

CA Seller's Permit number: \_\_\_\_\_ (ENCLOSE A COPY OF YOUR CERTIFICATE)

Non-Profit?  YES  NO (If yes, please enclose a copy of your non-profit letter with EIN)

Name or owner/contact person: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City and zip code: \_\_\_\_\_

Business phone number: \_\_\_\_\_ Cell or home phone number: \_\_\_\_\_

Name of your on-site representative: \_\_\_\_\_

Email address: \_\_\_\_\_

Standard 10'x 10' booth Space:  I'm a Non-Profit Food Vendor: \$50  
 (Cash or money order only)       I'm a General Vendor: \$50  
                                                   In addition to the above, I need a larger space *if so please contact Tammy Sumner (page 2) to discuss additional fees and/or arrangements.*

Speaker: Will you be using a microphone or other voice enhancement system?  YES  NO

Samples: Will you be handing out edible samples to promote your product?  YES  NO

Do you want confirmation?  YES *If yes, please enclose a self-addressed stamped envelope.*  NO

**Soliciting:** Please indicate if you are not selling during this event and are only taking leads for future business. Even if only taking leads, please be advised that the State Board of Equalization requires you to file for a Seller's Permit. The Winterfest Organizers abide by all the requirements of the State of California, County of Placer and the City of Colfax.

\_\_\_ YES, I am taking leads only.

**Note:** Any booth that has a mandatory gain, i.e raffles, drawings, etc. requires a paid for booth.

**I have submitted the following with my application:**

\_\_\_ Correct payment as either cash or a money order (made payable to Colfax Chamber of Commerce).

\_\_\_ Copy of your Liability Insurance

**Note:** All non-food vendors must bring a copy of their Resale License to the event.

**Food vendors:**

\_\_\_ Your menu, including drinks with prices for each item listed

\_\_\_ A current Health Permit

\_\_\_ Placer County's Temporary Food Packet

\_\_\_ Non-profit or Vet Exempt Paperwork

**Note:** Please make money orders payable to: Colfax Chamber Of Commerce

**STATEMENT OF FACT:**

I have read, understand and agree to abide by the stipulations put forth on the introductory page 1 and instructions on page 2 of this document. I also understand there will be no refunds once our application has been accepted.

**Print name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_