



FOOD/DESSERT VENDOR APPLICATION

OCTOBER 25 & 26, 2019 // 5:00 PM - 9:30 PM

SALT RIVER FIELDS // WWW.SRFBALLOONFESTIVAL.COM

DEADLINE: OCTOBER 4, 2019 (or when sold out)

CONTACT INFORMATION (Please type or print legibly)

Contact Name _____ Business Name _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Fax _____ Email _____

BOOTH INFORMATION (Please type or print legibly)

Space Requirements _____ feet long _____ feet deep Power Requirements _____

Booth will be using propane (city ordinance requires all propane tanks to be 10ft. away from a canopy.)

MENU ITEMS

Please list all menu items and prices below.

FOOD/DESSERT VENDOR FEE: FOOD TRUCK FOOD TRAILER

_____ \$600 Each

_____ \$650 Each (includes power)

SERVICE WINDOW:

- Driver Side
 Passenger Side
 Back

TOTAL DUE: _____ PAYMENT METHOD: CASH / CHECK / CREDIT CARD (form on page 3)

PLEASE MAKE ALL CHECKS PAYABLE TO: SALT RIVER FIELDS

MAIL COMPLETED APPLICATION & PAYMENT TO:

Salt River Fields at Talking Stick

7555 N. Pima Rd. Scottsdale, AZ 85258

Application will not be processed and space will not be secured until payment is received.

REQUIRED ITEMS FOR ACCEPTANCE

- Completed Spooktacular Application
 2019 SRPMIC Business License. [CLICK HERE](#)
 2019 SRPMIC Temporary Health Permit. Please complete & submit the attached form (form on page 5)
 Copy of Most Current Health Inspection
 Certificate of Insurance - \$1 Million Policy & list Salt River Fields as additionally insured (see page 4)
 Booth site plan and/or pictures

For the safety, security, and benefit of our vendors, all participants must abide by the rules and guidelines on the following page. Any non-compliance may result in immediate removal from the festival and further action will be taken, if necessary. Please indicate by signing below that you have read and will comply with the rules and guidelines set forth.

VENDOR SIGNATURE _____ DATE _____

CONTACTS

Chris Bonnell 480-270-5166 chrish@saltriverfields.com

FOOD VENDOR RULES & GUIDELINES

- Food Vendor Applications and all supporting documentation must be submitted by **October 4, 2019**. Salt River Fields is not responsible for applications that do not include the necessary documentation.
- Submission of an application does not guarantee acceptance to the event. Due to the limited space, vendor selection will be based on menu, completion of paperwork, and payment. In addition, SRF utilizes the North American Industry Classification System (NAICS) and as such, SRF reserves the right to limit the number of participating Food Vendors in all lines of business (i.e. Shaved Ice, Fry Bread, etc.). Any application fees submitted will be refunded to any vendor not approved.
- All vendors must hold a 201 SRPMIC business license or will not be allowed to participate.
- **SPACE IS LIMITED / VENDORS WILL BE ACCEPTED ON A FIRST-COME BASIS.**

MENU & BEVERAGES

- Menus can contain as many items as you would like.
- Food Vendor menus will be approved on a first come basis. All menus are subject to approval by Salt River Fields. Menu prices listed on application may not change before or anytime during the event.
- All beverages will be sold by Salt River Fields. However, vendors can purchase water/ soda from Salt River Fields, at a price just above cost, to resell at their booth at a predetermined price, set by Salt River Fields.

BOOTH REQUIREMENTS

- Vendors are responsible for setup and teardown of all signage, tents, tables, and equipment. You may use only your assigned space.
- Vehicles are only allowed on the event site for setup prior to the event and for teardown after the event closes. You will be notified when it is safe to bring your vehicle onto the event site. All vendors will receive a confirmation letter regarding load-in and load-out times.
- All tents, booths, and/or canopies must be made from fire retardant materials. Each food vendor must have an approved fire extinguisher (carbon dioxide or multi-purpose dry chemical & a minimum of 20 lbs.) in their booth.
- All food vendors are responsible for complying with all City of Scottsdale and State of Arizona guidelines for food service to the public.
- In an effort to protect your space and effectively maintain cleanliness of the event, any vendor found not staffing their booth, for an extended amount of time will be required to "close their booth" for the duration of the event. Vendors not adhering to this policy will be fined \$300.

LOAD – IN / LOAD-OUT INFORMATION

- Vendors may load-in on **Thursday, October 24**, from 10 am to 6 pm & **Friday, October 25** from 10 am to 3 pm.
- All vendors must be in place by 3 pm on **Friday, October 25**
- Vendors will be allowed to leave on **October 25** to replenish their supplies.
- All vendors must be back in place and ready to conduct business by 3pm on **October 26**
- Final load-out for the event can begin at 10:15 pm on the 26th or upon approval from SRF Security.

GENERAL

- All Spooktacular participants and their employees are expected to serve as a positive representation of the community and at no time should engage in any illegal activities.
- Any vendor found in violation of these rules can be fined and immediately removed from the festival.
- SRF, employees, related festival providers and participating sponsors will **NOT** be responsible for any injury, loss, or damage that may occur to the vendor, its employees or property prior to, during or subsequent to the period covered by the vending contract. The vendor signing this contract expressly releases all of the aforementioned from any and all claims from such loss, damage or injury.
- SRF is grateful for the support of our sponsors. All vendors are expected to work with our sponsors and follow contract specifications when applicable. This event will be photographed and/or videotaped. By participation in this event, you hereby consent to the use of your likeness or image in those photographs or video for future promotional consideration by Salt River Fields at Talking Stick.

*****A VENDOR IS CONFIRMED WHEN PAYMENT IS TAKEN AND ACCEPTED BY SALT RIVER FIELDS*****

INSURANCE REQUIREMENTS

Company shall maintain and pay all premium costs for and ensure that Company's contractors maintain and pay all premium costs for the following insurance coverage in amounts not less than specified throughout the duration of the event.

IF YOU HAVE WORKERS WORKING FOR YOU AT THE EVENT...

A. Statutory Workers' Compensation, including Employer's Liability Insurance, subject to limits of not less than \$500,000.00, affording coverage under the Workers Compensation laws of the applicable state. Company will cause, if allowed by law, its workers' compensation carrier to waive insurer's right of subrogation with respect to SRF its parents, partners and their affiliated companies.

COMMERCIAL GENERAL LIABILITY INSURANCE...

B. Commercial General Liability Insurance for limits of not less than \$1,000,000.00 per occurrence Bodily Injury and Property Damage combined; \$1,000,000.00 per occurrence Personal and Advertising Injury; \$2,000,000.00 aggregate Products and Completed Operations Liability; \$100,000.00 Fire Legal Liability, and \$2,000,000.00 general aggregate limit per event. The policy shall be written on an occurrence basis.

INSURANCE ON YOUR FOOD TRUCK OR CAR DRIVING ONTO THE EVENT SITE...

C. Automobile Liability Insurance with a limit of not less than \$1,000,000.00 combined and covering all owned non-owned and hired vehicles.

UMBRELLA LIABILITY INSURANCE...

D. Umbrella Liability or Excess Liability Insurance may be requested at the discretion of SRF over limits and coverage noted in paragraph B, above. This policy shall be written on an occurrence basis.

NAME SALT RIVER FIELDS (SRF) AS ADDITIONALLY INSURED...

E. Policies (b), (c), and (d) above shall be endorsed to name SRF, SRPMIC, their respective parents, partners, subsidiaries, divisions and affiliates, and each of their respective officers, directors, shareholders, employees, agents and representatives as "Additional Insured's" with respect to any and all claims arising from Company's operations. The Company will deliver to SRF satisfactory evidence of the insurance coverage described above on a certificate form approved by SRF or, if required, copies of the policies. All required insurance will be placed with carriers licensed to do business in the applicable state(s), will have a rating in the most current edition of A.M. Best's Property Casualty Key Rating Guide that is reasonably acceptable to SRF and will provide thirty (30) days written notice of cancellation or non-renewal to SRF. Should any additional premium be charged for such coverage or waivers, Company will be responsible to pay said additional premium charge to their insurer. All insurance furnished by Company hereunder will be in full force and effect at all times during the event.

Company agrees that it will, at its sole expense, procure and maintain insurance as follows:

TYPE OF INSURANCE	LIMIT OF INSURANCE
General Commercial Liability	\$1,000,000 Per Occurrence / \$2,000,000 Aggregate
Workers Compensation & Employers Liability	Statutory
Business Auto Liability including Hired & Non Owned Auto Liability	\$1,000,000
Excess / Umbrella	\$2,000,000 Per Occurrence

Company agrees solely with respect to liability caused by the sole negligent acts of Company to name SRF and Salt River Pima Maricopa Indian Community, its officers, employees, volunteers and directors as Additional Insured's on Company's General Commercial Liability and Auto liability insurance policies. Such insurance shall be provided to Additional Insured's on a primary and non-contributory basis.

To the maximum extent permitted by applicable law and the insurance policy maintained, Company agrees to waive their insurer's rights of subrogation.

Prior to commencing the Services, Company shall furnish a certificate of insurance evidencing compliance with the foregoing provisions and insurance requirements.

INDEMNIFICATION

Vendor shall indemnify, defend and hold harmless SRF and their respective parents, partners, subsidiaries, divisions and affiliates, and each of their respective officers, directors, employees, agents and representatives from and against any and all claims, demands, suits, causes of action, liability, judgments, damages, costs and expenses (including reasonable attorneys' fees and court costs) (collectively, "claims") asserted against any of the SRF parties and arising out of or resulting from (i) the acts or omissions of vendor, its employees, agents or subcontractors. The foregoing shall include, without limitation, any claims for bodily injury, death or property damage.

**PLEASE TURN IN YOUR CERTIFICATE OF INSURANCE FOR REVIEW NO LATER THAN OCT. 4TH TO
TONY FARESE | TONY@SALTRIVERFIELDS.COM**

CREDIT CARD AUTHORIZATION FORM

PLEASE COMPLETE THE INFORMATION BELOW:

I, _____ authorize Salt River Fields to charge my credit card indicated below
(Full name)

for _____ (amount) _____ (date)

This payment is for _____

Billing Address _____ Phone #: _____

City, State, Zip _____ Email: _____

Account Type:	Visa	Master Card	AMEX	Discover
Cardholder Name	_____			
Account Number	_____			
Expiration Date	_____			
CVV2 (3 digit number on back to Visa/MC, 4 digit on front of AMEX)	_____			

SIGNATURE _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorized form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.



SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY

HEALTH SERVICES/PUBLIC HEALTH PROGRAM

10005 E Osborn Rd. Scottsdale, AZ 85256

Fax (480) 362-5568

RETURN TO: Chris Bonnell of Salt River Fields

APPLICATION FOR TEMPORARY PERMIT

EVENT NAME: _____ (example: Red Mountain Pow Wow)

EVENT DATE: _____

ESTABLISHMENT INFORMATION:

BUSINESS NAME _____

ADDRESS _____

MANAGER NAME _____ TELEPHONE _____

OWNER INFORMATION:

NAME/CORPORATION _____

ADDRESS/CITY/ZIP _____

CONTACT _____ TELEPHONE _____

Permit Fee: FEE WAIVED

Please submit separate permit applications for each permit when more than one permit is requested.

Please read and sign below:

I/We assume complete responsibility for the business to be conducted at the premises for which I/we are making application for a food permit. The requested food permit is in addition to any other permits or licenses required by law. I/We certify that said business at the premises will be operated in full compliance with all applicable ordinances and regulations pertaining thereto. I/We understand that I/we are responsible for knowing the contents of the applicable regulations as they pertain to said establishment. Information pertaining on how to purchase the regulations may be obtained from the Public Health Program, 10005 East Osborn Road, Salt River Pima-Maricopa Indian Community, or call _____ or (480) 362-5706.

Permittee hereby waives all claims against the Salt River Pima-Maricopa Indian Community and the United States and agrees to hold the Salt River Pima-Maricopa Indian Community and the United States free and harmless from liability for any loss, damage or injury arising from the use of the premises by Permittee, together with all costs and expenses in connection therewith.

I/We hereby certify that I/we are owner(s) or duly authorized owner's agent(s), that I/we have read this application and that all information is correct. I/we further certify that I/we have read, understand and will comply with all of the provisions herein.

Applicant Signature/Title _____ Date _____

PERMIT TO OPERATE – TEMPORARY FOOD VENDOR

PERMIT VALID _____ TO _____

BUSINESS NAME: _____

EVENT NAME: _____

SRPMIC HEALTH OFFICIAL: _____ DATE: _____

(PERMIT NOT VALID UNTIL SIGNED)