

Buena Vista Township Food Vendor Application

32nd Annual Independence Day Celebration July 2, 2022 – 11 am 'til Fireworks at dark (Rain Date: July 9th)

Company Name:	Contact Numbers:	
Address:	Contact Person:	
Type of Business:	Years in Business:	
Items you wo	uld like to be sold at the even	t are:
NOTE: Items must be reviewed by Buena Vista	Township. Vendor will be con	tacted with final decisions.
Do you use a vehicle to work your business? Yes (If yes, what kind of vehicle? No)
For participation in Buena Vista Township event applicable) to the Special Events Committee alo	• •	•
REQUIRED: Certificate of Liability Insurance	e showing Buena Vista Townsl	nip as an additional insured.
REQUIRED: Current Board of Health certific	cate (In your respective area)	
IF APPLICABLE: NJ Division of Fire Safety Ty https://www.nj.gov/dca/divisions/codes/R	• •	se use the link included here:
Food Vendor	Fee Schedule for 20	22
(Please check appropriate size and submit corresponding pages)	yment made payable to <u>Buena Vista Tow</u>	<u>rnship Special Events</u> with application)
10x10 Ft area serving 3 items or less	\$75.00	PAID: <i>Date:</i>
10x10 Ft area serving 4- 8 items	\$125.00	
More than 10x10 and/or 9 items (Tented/	'Non Truck) \$175.00	Cash
All Food Trucks/Catering Vehicles	\$175.00	Check #
I hereby certify that the information provi	ded on this application is tr	ue and correct. I will

I hereby certify that the information provided on this application is true and correct. I will provide all necessary paperwork and fee(s) required to participate in this event. I will also abide by the rules outlined in the attachments to this application and understand Buena Vista Township reserves the right to decline this application.

Annlicant's Name and Title	Date

BUENA VISTA TOWNSHIP

FOOD VENDOR APPLICATION



(Attachment I)

Date:				
(List Name of Company or Individual)				
agrees to participate in the32 nd Annual Independence D (Name of Event)	ay Celebration			
to be held on July 2, 2022 (Rain Date 3	July 9, 2022)			
 Vendor will comply with the list of prohibited items stated on Attachment II Vendor will pay the designated fee (listed on cover page) to participate in the event. Vendor will set up at the specified time and place as discussed prior to the event. Vendor will sell ONLY the items approved by Buena Vista Township. Vendor agrees to post in public view all menu items and prices. Vendor will supply their own power source/generator (if necessary) Vendor will comply with and adhere to all regulations and requirements set forth by the NJ Division of Fire Safety (Per event). Failure to do so may result in the State Inspector removing you from the event. All fees paid to Buena Vista Township are non-refundable. 				
I agree and comply with the above terms and conditions. If these terms and conditions are not met, I will not be able to participate in the event and understand Buena Vista Township reserves the right to decline this application.				
Vendor Signature	 Date			
Township Official Signature	Date			

BUENA VISTA TOWNSHIP PROHIBITED EVENT ITEMS

(Attachment II)

The following items are **PROHIBITED** from being sold at Buena Vista Township Events. This list is subject to change and the Buena Vista Township Special Event Committee has the right to change/add items to this list. **Anyone that does NOT comply with this list will be asked to leave the premises immediately. NO EXCEPTIONS!!**

TOBACCO AND E-CIGARETTE PRODUCTS OF ANY KIND
HAIR SPRAY
INK
POPPERS
POTATO GUNS
SQUIRT GUNS
GUNS (REAL OR TOYS)
KNIVES (REAL OR TOYS)
SMOKE BOMBS or STINK BOMBS

SNAPS

SILLY STRING – ANY TYPE
ANY NEW PRODUCT CREATING NOISE OR THAT MIGHT SCARE SOMEONE
NO PRESCRIPTION DRUGS
NO ALCOHOLIC BEVERAGES
NO ILLEGAL DRUGS
NO EXOTIC ANIMALS

If you think that a product you carry is not *PARENT FRIENDLY* or may cause physical damage to a person, please be responsible and remove it from your table or booth. The safety of our citizens and patrons of the event is of utmost importance to us, and your cooperation regarding this matter is expected and appreciated.

I agree to abide by the list of restricted items listed above with the full understanding that I will be removed from the event immediately if violated and I will not be invited to return in the future.

Please sign and date below and return with	your check or money order and Registration Form.
Name of Vendor	
	- <u></u>
Signature Signature	Date

Thank you.