

SALINAS VALLEY FAIR

625 Division Street King City, CA 93930

831-385-3243 FAX 831-385-3345

Contact - Cindy Escobar E-mail address: ce@salinasvalleyfair.com

May 17 – 20, 2012

FOOD CONCESSION APPLICATION

****\$10.00 non-refundable Application Fee is due per application****

\$25.00 Non Refundable Application Fee per application received after deadline

Company Name: _____

Owners Name: _____

Mailing Address: _____

City: _____ State _____ Zip Code _____

Phone: _____ Cell Phone _____

E-mail address _____ St. Board of Equalization # _____

(Food stands must be approved & inspected by Monterey County Health Dept. & King City Fire Dept.)

Type of Stand: Self Contained Food Trailer Other (Tents are not permitted)

Describe: _____

Food concession rates:

\$500 minimum guarantee or 21% of gross sales after taxes whichever is greater.

\$185 Monterey County Health Dept. fee per food trailer.

Cash register tapes are required to be supplied to office daily.

Stand Size (Size to include open awnings & hitch) Width _____ Depth _____ Height _____

Serve From: Front _____ Side _____ Both _____

Counters: Size _____ Counters Placed: Front _____ Side _____

ELECTTRICAL Requirements & Costs for run of Fair: Select amps needed in your booth space:

_____ 1 - 20 AMPS - \$50.00 _____ 21 - 50 AMPS-\$100.00 _____ 51-100 AMPS-\$200

Fair does not provide extension cords, cord caps or other equipment required.

RV/Stock Truck/Dead Storage Requirements: **If RV, Stock truck or dead storage is needed, please indicate type and amount of space needed for each.**

RV ___\$140/week ___Stock Truck-\$50/week _____Size ___ Refrigerated Dead Storage _____

PLEASE LIST ALL PRICES & PRODUCTS YOU WOULD LIKE TO SELL-Attached add'l sheet

Salinas Valley Fair Food Concession Application-Pg two
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Other Utilities Needed _____Water _____Sewer _____Used Oil bin

(All used oil must be poured into oil bins provided by Fair. Original oil boxes or other containers are not acceptable.
Non compliance will be cause for a clean up & disposal fee)

General Liability Insurance: Each exhibitor must provide the Salinas Valley Fair with
Proof of general liability insurance of no less than \$1,000,000.

___My own carrier Carrier Name_____

___WFA Master List CFSA #_____ Policy Expires_____ Name policy is under_____

___Purchase Insurance through Fair

Worker's Compensation Insurance: - Each exhibitor who hires employees must also provide a
copy of their worker's compensation insurance.

Requirement to send picture of trailer or stand with application

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**Send application accompanied by non-refundable application fee, complete
list of all items to be sold & a picture of stand to above address.**

Deadline for applications is March 25, 2012.

We will continue to take applications until May 1, 2012 if need be.

****Do not send money with application!!!****

**If your application is accepted, you will be sent a
contract and will be required to send the \$500
guarantee amount with signed contract.**