NEV	V CITY CHAM	IBER STREET F (14 th Year)	FESTIVAL APPLICATION
	June 1	14, 2020	October 4, 2020
		10 AM - 5 PM (Rain or Shine)
BOOTH SIZES:	10 x 10 single space	e 🗌 10 x 20 double sp	ace (double fee for double space)
Art/Craft (I	Handmade by exhibitor) Not Handmade by exhibi Commercial - \$190* 00* [] If Truck # of Feet with hitch	tor) \$175* 🔲 Chamber N 🗌 Non-Profit 🗌 Walk –up o	a FEES PER SPACE : Members - \$95* □ Chamber Members Food - \$100* (Rockland County-based) \$100* day of show - \$200 □ <u>RETURNING EXHIBITOR</u> generator you must have a fire extinguisher)
Hauppauge, I		-4183 - Fax: 631-582-619	AIL TO: Woodwill Corporation, PO Box 5186, 03 - www.woodwill.com - jrwoodwill@aol.com
	plication, SIGN and return wi FORMATION – Please ty		\$1.00 if no envelope enclosed . (ONE envelope for <u>EACH</u> show) (Space # sent out 1 week before show)
PRODUCT DE		specific to avoid placement near a pot	
Name of Busines			
Last Name:		First Name	e:
Address:			
		State:	Zip Code:
City:		Cell: ()	·
 City: Phone:()	ΝΥS ΤΑλ	X # : tion will not be accepted without NYS Sales Tax Number
City: Phone:(E-Mail: I have included:)	NYS TAX	X #:
City: Phone:(E-Mail: I have included: Photo of I have read, ur) Completed application f work & display ST/ nderstand and agree to t	NYS TAX Applicat	X # : tion will not be accepted without NYS Sales Tax Number
City: Phone:(E-Mail: I have included: Photo of I have read, ur	Completed application f work & display ST/ nderstand and agree to t	NYS TAX Applicat	X #: tion will not be accepted without NYS Sales Tax Number Credit Card info.(on back) # 10 ENVELOPE (REQUIRED for space #) les for Exhibitors on back of this application. ACT WILL NOT BE PROCESSED Date

New City Street Festival Exhibitor Contract - Rules & Regulations

- 1. It is the sole responsibility of Food Vendors to obtain the proper permit from the Rockland County Dept. of Health (845) 364-2600 or (845)364-2606. Failure to obtain the permit will result in removal from the fair, without refund.
- 2. It is the sole responsibility of all exhibitors to collect and pay NYS Sales Tax and each must have a current NYS Sales Tax Number and certificate attached to their application. Contact NYS Dept. of Taxation and Finance at 1-800-972-1233 for a DTF No. 17 if required.
- 3. Certificates of Insurance for Food Vendors <u>must be attached to the application</u>. Go to <u>www.woodwill.com</u> to download the required information for the CERTIFICATE OF INSURANCE located at the bottom of the Woodwill show schedule page (Insurance Information For All Food Vendors).
- 4. Check-in time begins at 7:00 am. Set-up MUST be completed and vehicles removed NO LATER than 9:00 am. Exhibitors arriving late (after 9:00 am) will forfeit their space and will be placed at the discretion of the show management
- 5. Vehicles must be unloaded and then park your vehicle before setting up.
- 6. Exhibitors must supply their own set-up equipment. Tents will NOT be allowed unless they are weighted on all 4 poles. No bare tables –all tables must be covered all the way around and to the ground. All cartons must be out of sight.
- 7. No exhibitor will be allowed more than 10' from the curb THIS WILL BE STRICTLY ENFORCED.
- 8. Electric is NOT available. Generators must be approved in advance. Only QUIET generators will be permitted. Exhibitors must have a fire extinguisher if you have a generator.
- 9. Spaces will be assigned by the date on the application. Returning exhibitors will be given priority until the cut- off date. Food Vendors & Exhibitors must clearly state on the form **EXACTLY** what they are selling.
- 10. ABSOLUTELY NO hazardous or objectionable items will be permitted. The New City Chamber of Commerce/Woodwill Corporation reserves the right to eliminate any items for sale which are deemed unacceptable or in conflict with street fair guidelines or any exhibitor at their absolute discretion.
- 11. Merchants or exhibitors are strictly prohibited from sub-leasing or sharing a space. Only the business whose tax ID
- number/business name will be allowed to operate in that space. Violators will be charged an extra \$150.00/\$190.00
- 12. Exhibitors are required to list all the products that they sell on their application.
- 13. Merchants participating in the festival may sell in their booth only items regularly for sale in their shops.
- 14. Absolutely NO Refunds. An Exhibitor's inability to appear at the Fair for any reason will not result in a refund. No refunds will be made due to inclement weather, Fairs are Rain or Shine!
- 15. Exhibitors must keep their area clean and free from debris. Exhibitors are responsible for their own garbage and must put it in the dumpster or take it with them. Exhibitors who do not comply will be subject to a fine.
- 16. Tear down begins at 5:00pm, all exhibitors **must have their exhibits broken down and vacated by 6:00pm** to allow clean up by the DPW. Vehicles will not be permitted on the streets until after 5:00pm or as per the police on site.
- 17. If you are applying as a "Non-Profit," you must include paperwork documenting your organization's non-profit status.
- 18. By signing this agreement, The Exhibitor agrees to indemnify, defend and hold harmless The Town of Clarkstown, in the County of Rockland, The New City Chamber of Commerce, Woodwill Corporation its members, officers, employees, agents and representatives for any personal injuries, property loss or damage suffered by any person as a result of the actions of the exhibitor. New City Chamber of Commerce/Woodwill Corporation, shall not be held liable for failure to perform or fulfill its contractual obligation provided such failure is caused, occasioned or furthered by closures of site locations due to any cause or causes beyond its control, including, but not limited to acts of God, fire, flood, war, public disaster, strikes or labor difficulty, governmental enactment, regulations or ordered or any other cause or causes beyond its control.

CREDIT CARD PAYMENT INFORMATION: \$200 + \$7.00 - \$190 + \$6.65 - \$175 + \$6.15 - \$150 + \$5.25 - \$100 + \$3.50 - \$95 + \$3.35

Total Amount to be charged to your credit card - \$				
I hereby authorize these charges to be made to my	VISAM	ASTER CARD	(PLEASE WRITE	CLEARLY)
Card #	Exp Date:3 Digit Security Code:			
Name on Card:	Add Billing address if different than on application:			
Address:	City:	St:	Zip:	
Signature:	D	Date:		

WOODWILL CORPORATION

PO Box 5186, Hauppauge, NY 11788 – PH: 631-234-4183, Fax: 631-582-6193 – <u>jrwoodwill@aol.com</u> <u>www.woodwill.com</u>