



VENDOR APPLICATION



EVENT DATE: SATURDAY, APRIL 22, 2017 - RAIN OR SHINE
WHITE PARK - 3936 CHESTNUT, RIVERSIDE, CA 92501
HOURS OF OPERATION: 10:00 am to 7:00 pm – NO EXCEPTIONS
Set Up: Friday, April 21, 2017 - 5:30 pm to 8:00 pm

La Placita Street Fair - Market St. between University Ave. & 10th St.
Set up: Saturday, April 22, 2017 – 6:00 am-8:00 am

Application for booth space at the Riverside Tamale Festival is hereby made subject to acceptance by the Festival Steering Committee. All booth spaces are 10' x 10'. Applicants may have up to four single booth spaces. Riverside Tamale Festival will NOT furnish any tents, EZ ups, tables or chairs. Power is NOT available. All vendors must furnish their own generators and all FOOD booths must have a floor covering and wash station. All vendors must offer a minimum of 75% Latino food products. All vendors must decorate in a Latino theme for the event. Vendors that do not adhere to these requirements will be asked to leave with NO REFUND.

FOOD VENDORS: Health Permits will be covered under the Riverside Tamale Festival blanket policy with approval. An additional 5' of rear space is required for cooking equipment. Vendor must bring appropriate working and certified Class K Fire Extinguishers(s) per City of Riverside Fire Code: CFC 904.11.6.2 and 906.

Initial Acknowledgement: _____

NOTE: All vendors will be required to submit a current business license or seller's permit, and proof of liability insurance with your application. SPACE IS LIMITED. PLEASE SUBMIT PROMPTLY. Booths available on a first come first served basis. Booth fees are as follows. Please indicate the number of booth(s) requested. All booth sizes are 10'x10' unless otherwise noted.

_____ Food or Retail Vendor	\$400 _____
_____ Food or Retail Vendor (10" x 20" space)	\$600 _____
_____ Artisan Vendor (Home made products)	\$200 _____
_____ Non-Profit Organization (must submit proof)	\$300 _____
_____ Refundable Cleaning Deposit (SEPARATE CHECK REQUIRED)	\$200 _____
_____ One Day Temporary City of Riverside Business License	\$5 _____
<input checked="" type="checkbox"/> MANDATORY Festival Insurance	+\$100 = TOTAL: _____

List exactly what product(s) you will be selling at your booth (use additional sheet if necessary):

Please enclose a separate refundable check for \$200 for cleaning fee payable to Riverside Spanish Town Heritage Foundation. Enclosed is our booth check for \$_____ (Check # _____) including \$100 mandatory insurance fee and cleaning fee check for \$200 (Check # _____). This application will not be given consideration without all accompanying checks. **CALL (951) 356-4105 TO PAY WITH CREDIT CARD.** Mail application, proof of insurance, media release and all checks to Spanish Town Heritage Foundation • 3643 University Ave., 2nd Floor, Suite 1, Riverside, CA 92501.

Applicant Name _____

Date _____

VENDOR INSTRUCTIONS

1. All vendors must remain in operation during all festival hours and cannot tear down until the conclusion of the event—**NO EXCEPTIONS.**
2. The County Health Inspector and the City of Riverside Fire Inspector will visit and inspect each booth prior to 10am opening time. **ALL VENDORS MUST BE READY FOR INSPECTION AT 8:30AM.** All health permits will be covered under the Temp Food Permit for the Riverside Tamale Festival.
3. Space will be assigned only after application has been approved by the Riverside Tamale Festival, and is done on a first-come, first-serve basis. Locations will be assigned by the Committee in the best interest of the Riverside Tamale Festival.
4. Once this application is approved by the Riverside Tamale Festival space fees paid will not be refunded. All approved vendors will be notified of their booth space number(s) prior to the event date.
5. Vendor agrees to indemnify, defend and hold harmless, the Riverside Tamale Festival, the Spanish Town Heritage Foundation, and the City of Riverside, from and against any and all loss, damage, claim for damage, liability, expense or cost, including attorneys' fees, which arises out of, or is related to, or is in any manner connected with Vendor's participation in the Riverside Tamale Festival. This indemnification provision shall apply to any acts or omissions, willful misconduct or negligent conduct, whether active or passive, on the part of Vendor or of anyone employed by or working for Vendor.
6. The Riverside Tamale Festival will take place Saturday, April 22, 2017, from 10am to 7pm, RAIN or SHINE.
7. The undersigned agrees to abide by the official rules and regulations of the Riverside Tamale Festival.

DEADLINE FOR VENDOR APPLICATIONS & PAYMENT: FEBRUARY 15, 2017

Company: _____

Seller's Permit # _____ Riverside Business License # _____

Contact Name: _____ Phone: _____

Address: _____ Fax: _____

City, State, Zip: _____ Email: _____

Signed: _____ Date: _____

VENDOR COORDINATOR: Andrew Guerra - 951-823-3258
951-509-6802 FAX | aguerrajr@live.com

**MAIL CHECK OR MONEY ORDER PAYMENTS TO
3643 UNIVERSITY AVE., 2ND FLOOR, SUITE 1
RIVERSIDE, CA 92501**

CREDIT/DEBIT CARD PLEASE CALL 951-356-4105

**COMMUNITY EVENT
TEMPORARY FOOD FACILITY
OPERATOR'S AGREEMENT FORM**

Name of Event: Riverside Tamale Festival 2017

Location of Event: White Park - 3936 Chestnut, Riverside, CA 92501

Dates and Times of Event: Saturday, April 22, 2017 - 10:00 a.m. to 7:00 p.m.

Name of Food Facility: _____

Name of Owner: _____

Name of Person in Charge: _____

Contact Number for Person in Charge: _____

Circle One: **Booth:** 10x10 10x20 **Mobile Food Facility**

If booth, describe enclosure: _____

Food and beverage to be served: _____

Where will food be prepared: _____

How food/beverage will be prepared and served: _____

List of cooking equipment: _____

Fire extinguisher? _____ (Check with city/county fire department for rating)

How will food be held hot (above 135°F)? _____

How will food be held cold (below 45°F)? _____

How will temperatures be monitored? _____

Describe hand wash set up: _____

Describe Utensil wash setup /Test Strips? _____

Will any equipment be stored outside of booth or mobile food facility? _____

If yes, how will items be stored and protected? _____

I agree to adhere to the following requirements to operate at said event:

- Name of facility, city, state, zip code, and name of the operator shall be legible and clearly visible to patrons.
- Hand washing facilities shall be provided at operations handling any open food. Hand washing facilities shall be properly stocked and used as often as necessary to keep hands clean and protect food from cross-contamination. **Note: gloves and/or hand sanitizer are not approved replacements for hand washing.**
- All food and beverage items will be stored, displayed, prepared/ processed at an approved food facility and **not a private home/residence.**
- Cold and hot holding equipment shall be provided to ensure proper temperature control during transportation, storage, and operation of the temporary food facility.
- All potentially hazardous foods will be held at or below 45°F or at or above 135°F. At the end of the operating day, any foods held above 41°F shall be disposed of. Thermometers shall be provided to monitor temperatures.
- Service ice is considered a food and shall remain off the ground, stored in clean sanitized food grade containers and properly dispensed by operator of temporary food facility or in approved bulk dispensing units.
- All equipment shall be maintained in a clean and sanitary condition.
- Equipment shall be washed in hot (minimum 100°F) soapy water, rinsed and sanitized either in a 3-compartment ware washing sink or 3-bucket system as approved by this Department depending on length of event. Sanitizer testing equipment shall be provided to measure concentration of sanitizer.
- Operations handling any open food must provide **completely enclosed booths**. Contact this Department for approval of alternative food protection means.
- Significant changes of Menu items shall be discussed and approved by this department.

I understand these requirements and agree to operate in a manner to protect food from possible contamination.

Signature: _____ Date: _____

Contact Phone Number: _____

**PLEASE FAX/EMAIL VENDOR APPLICATION AND FORM TO
ANDREW GUERRA AT (951) 509-6802 OR AGUERRAJR@LIVE.COM**

DEADLINE FOR VENDOR APPLICATIONS & PAYMENT: FEBRUARY 15, 2017

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Reviewed by: _____

Notes: _____