## WARETOWN SPRING WINE FESTIVAL

## Waretown Recreation and Lake Area 182 Wells Mills Rd

Two days - Saturday and Sunday ... April 25 and 26

12 Noon to 5 pm ~ Rain or Shine Set up: 9 - 11 am Breakdown: 5 - 6 pm

Food Vendor Fee: \$225.00 (16' x 16' space)... each additional foot \$22.50

## **PLEASE PRINT**

Name:	Business Name:		
Address:	City:	State:	Zip:
Phone:	Cell:		
Email:			
List all items to be sold (NO beverages will allo	owed)		· · · · · · · · · · · · · · · · · · ·
Cooking: Yes No If Yes, F	Fire Permit Required		
Food Vendor must display menu with price fire extinguisher. Please submit a copy of			
Enclosed is payment for \$225.00 or ch	arge my [ ] Visa [ ] Maste	rCard [ ] Amex	
Card No.	Exp. Date	3 c	or 4 digit Security Code
Signature			
I agree to be <b>open during all hours</b> of the event aduring the event and will make sure it is clean when <b>izing committee are final</b> , <b>there are no refunds</b> Consulting and any future involvement in events charge.	I leave. I understand that <b>all de</b> and that failure to abide by the	cisions made by Al above rules could te	len Consulting and/or the organ- erminate my relationship with Allen
All Food Vendors are <b>REQUIRED</b> to submit Insurance, a copy of NJ Sales Tax Certificate			
Signature:	Date:		

Mail Completed Vendor Application, Hold Harmless Agreement, Insurance Certificate, NJ Sales Tax Certificate, Commissary Sanitary Inspection Report and Check or Money Order **payable to**:

Allen Consulting, Inc. 89 Middletown Road, Holmdel, NJ 07733 Phone: 732-946-2711 Fax: 732-946-8032 E-mail: sylvia@allenconsulting.com

## WARETOWN SPRING WINE FESTIVAL

Vendor Hold Harmless/Insurance Agreement 2015

The Vendor agrees to maintain in full force a policy of comprehensive general liability insurance under which Township of Ocean and Allen Consulting, Inc., are named as additional insured, and under which the insurer agrees to indemnify and hold Township of Ocean and Allen Consulting, Inc harmless from and against all costs, expense, including reasonable attorney's fees, and/or liability arising out of or based upon any and all claims, accidents, injuries and damages arising out of the Vendor's negligent or improper acts in the operation at the above mentioned event(s).

The Vendor also agrees to indemnify and save harmless Township of Ocean and Allen Consulting, Inc. from and against all claims of whatever nature arising from, or claimed to have arisen from, any action, omission or negligence of the Vendor, or arising from any accident, injury or damage whatsoever caused to any person or property arising out of the Vendor's negligent or improper acts in the operation at the following listed events. The Vendor agrees to name Township of Ocean and Allen Consulting, Inc.as additional insured, and to provide a valid certificate of insurance with a liability limit of at least \$1,000,000 per occurrence.

Print Organization/Vendor Business Name:		
Event(s)	Event Date(s)	
Print Officer/Vendor Name	Officer/Vendor Signature	
<b>Print</b> Witness Name	Witness Signature	
Date of Agreement		

This form becomes part of the Certificate of Insurance to which it is/will be attached.

CERTIFICATE HOLDERS MUST INCLUDE NUMBERS 1 & 2 BELOW. ALL agencies may appear as additional insured on one certificate of insurance. You do not need separate certificates of insurance naming each agency as an additional insured. Mail to Allen Consulting, not Township of Ocean.

- 1. Allen Consulting Inc., 89 Middletown Road, Holmdel, NJ 07733
- 2. Township of Ocean, 50 Railroad Ave, Waretown, NJ 08758

Please Mail Insurance Certificate, Application, Payment & Hold Harmless/Insurance Agreement to:

Allen Consulting, Inc. • 89 Middletown Road • Holmdel, NJ • 07733
Phone 732-946-2711 • Fax 732-946-8032 • Email sylvia@allenconsulting.com