

# 2017 CHESTER SPRING BREW FEST

## Chester Merchants Association



Chester Spring Brew Fest  
Chester Merchants Association

Two days - Saturday and Sunday ... May 20-21

12 Noon to 5 pm ~ Rain or Shine

Set up: 9 - 11 am Breakdown: 5 - 6 pm

**Location: Gazebo Park, 175 Main Street, Chester**

**Food Vendor Fee: \$22.50 per linear foot**

**Send Photo of Food Truck or Display**

### PLEASE PRINT

Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Size space needed: \_\_\_\_\_

Social Media Sites [Website/FB/Twitter/Instagram]: \_\_\_\_\_

List all items to be sold (NO beverages will be allowed) \_\_\_\_\_

**Cooking: Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Fire Permit Required**

**Electricity: Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, \$35.00 Additional Fee Applies for Electric**

**Food Vendor must display menu with prices. If you bring a generator, it must be the silent type and you must have a fire extinguisher. Please submit a copy of your Commissary Sanitary Inspection Report.**

Enclosed is payment for \$ \_\_\_\_\_ or charge my  Visa  MasterCard  American Express

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ 3 or 4 digit Security Code \_\_\_\_\_

Signature \_\_\_\_\_

I agree to be **open during all hours** of the event and to **offer for sale only the items listed above**. I will keep my area neat and clean during the event and will make sure it is clean when I leave. I understand that **all decisions made by Allen Consulting and/or the organizing committee are final, there are no refunds** and that failure to abide by the above rules could terminate my relationship with Allen Consulting and any future involvement in events they organize. Checks returned for insufficient funds will pay an addi-

**ALL Food Vendors REQUIRED to submit Vendor Hold Harmless/Insurance Agreement, a Certificate of Insurance, a copy of NJ Sales Tax Certificate, and a Commissary Sanitary Inspection report..**

tional \$35 bank charge.

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

**2017 Vendor Hold Harmless/Insurance Agreement**  
**for Chester Spring Brew Fest May 20-21, 2017**

The Vendor agrees to maintain in full force a policy of comprehensive general liability insurance under which Chester Merchants Association and Allen Consulting, Inc., are named as additional insured, and under which the insurer agrees to indemnify and hold Chester Merchants Association 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.

The Vendor also agrees to indemnify and save harmless Chester Merchants Association 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 Chester Merchants Association 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.

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

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**Print** Organization/Vendor Business Name:

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**Event(s)**

**Event Date(s)**

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**Print** Officer/Vendor Name

Officer/Vendor Signature

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**Print** Witness Name

Witness Signature

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Date of Agreement:

**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 Chester Merchants Association.**

1. Allen Consulting Inc., 89 Middletown Road, Holmdel, NJ 07733

2. Chester Merchants Association, -address-

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

**Allen Consulting, Inc. • 89 Middletown Road • Holmdel, NJ • 07733**