



CITY OF CHINO
FOOD VENDOR APPLICATION
2024 HALLOWEEN SPOOKTACULAR
 RUBEN S. AYALA PARK, 14225 CENTRAL AVENUE, CHINO
 THURSDAY, OCTOBER 31, 2024

Office Use Only
 Date Received: _____
 Staff's Initial: _____

Name of Organization/Company _____ E-mail _____
 Full Name of Contact Person _____ DOB _____
 Address _____ City _____ Zip _____
 Day (____) _____ Mobile (____) _____ E-mail _____
 Emergency Contact _____ Phone (____) _____ Relationship _____

PARTICIPANT INFORMATION:

- Profit Food Vendor: \$145 Non-Profit Food Vendor: \$60 Cottage Food Vendor: \$35

Please list all food items, beverages/refreshments, etc. to be sold. Food Vendors will be selected based on application priority and food items. Water and soda can be sold for no more than one dollar. **Only the items listed here and approved by the City will be allowed to be sold in your booth, no exceptions.**

1st Choice: _____

2nd Choice: _____

Food will be: Prepared on-site Pre-packaged (Cottage Food) Will you need electricity? Yes No

Type of booth: Canopy; measurements _____ Food truck; measurements _____

Number and type of electrical items to be used: (Coffee pot, crock-pot, etc.) _____

What type of fire extinguisher will you have in your booth/food truck? Fire extinguisher grade _____

- At minimum, a Class 2A10BC Fire Extinguisher is required for open flames.
- What type of Health Permit do you have with San Bernardino County?
 Annual permit One-day permit **HEALTH PERMIT PR#** _____
- Submit a copy of the annual permit with this application. One-day permits must be made available to the City five days prior to the event. For more information visit, <https://ehs.sbcounty.gov>.

EVENT REQUIREMENTS

- Complete application form and submit. (Payment is due after approval of participation from City staff.)
- Completed applications will be accepted on a first-come, first-served basis. Incomplete applications will not be processed. Submit signed City of Chino Waiver Form. (See waiver on the back of this form).
- **City of Chino Business License. BUSINESS LICENSE #** _____
 - All vendors are required to submit a One-Day Temporary Permit. A One-Day Temporary Permit is \$13. Additional fees may be required by the City of Chino Finance Department, Business Licensing, 909.334.3263.
 - Fees will be waived for businesses who have a current City of Chino Business License. Must complete one day vendor permit form.
- **I am a non-profit organization and have a valid 501(c)(3). 501(C)(3) #** _____
 - All non-profit organizations are required to obtain a One-Day Temporary Permit.
 - Fees will be waived upon verification of non-profit status by Finance Department, Business Licensing.
- **All vendors (excluding non-profit) need a Seller's Permit:**
 I hold a valid State of California seller's permit. **My number is: S** _____
- **Once approved, food vendors and cottage food vendors must provide the following:**
 - Temporary Food Facility (TFF) Health Permit or Cottage Food Health Permit from the San Bernardino County Department of Environmental Health Services.
 - Proof of \$1 Million liability insurance and endorsement page listing the City of Chino as an additional insured.
 - Proof of State Board of Equalization seller's permit for temporary location. For more information visit, <https://www.cdffa.ca.gov>.

GENERAL FOOD VENDOR INFORMATION

- Booth set-up begins at **2:00 p.m.** Please have booth ready by **3:30 p.m.** **Vehicles must be out of the event area by 3:00 p.m. For the safety of the participants, vehicles will not be allowed to enter/exit until City staff determines it to be safe. Vendor must drive no more than 5 mph in the event area.**
- The City of Chino will not monitor nor guarantee exclusivity of merchandise sales.
- Any vendor (food/partner) leaving early, behaving inappropriately or unsafely during the event will affect any future application submission and participation in future events.
- Standard 10' x 10' space will be provided for registered vendors. Electricity (20-amp circuits) will be provided only if requested in advance.
- Accessible Vending requires a maximum counter height of 34".
- Registered vendors are responsible for supplying their own tables, chairs, canopy weights, and must comply with all County Health and Fire Department requirements (fire extinguisher, screening, hand washing equipment, etc.).
- **No refunds after Friday, October 11.**
- If the event is *cancelled* due to severe weather, a full refund will be issued for booth fee. However, **Business Licensing does not provide refunds.**

PLEASE INITIAL THAT YOU AGREE TO THE ABOVE: _____

Complete applications will be accepted **ONLY** through **Friday, September 27 or until spots are filled**).

Submit complete applications to:

Email: Nmaharaj@cityofchino.org

Mail/In-Person: Carolyn Owens Community Center • 13201 Central Avenue • Chino, CA 91710

Attn: Nisha Maharaj, Community Services, Parks & Recreation Coordinator

For more information or special requests/considerations, please contact

Nisha Maharaj, Community Services, Parks & Recreation Coordinator, at 909.334.3554, or Nmaharaj@cityofchino.org.

FOOD VENDOR WAIVER

*** WAIVER AND RELEASE BY APPLICANT(S)
FOR PARTICIPATION IN A CITY OF CHINO SPONSORED PROGRAM AND/OR
USE OF A CITY OF CHINO FACILITY**

Participant Name: _____ Activity: Chino Halloween Spooktacular

Program Dates: From: Thursday, October 31, 2024 To: Thursday, October 31, 2024

In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

1. My participation, and/or that of my child/children/guardians, is voluntary.
2. My participation, and/or that of my child/children/guardians, may result in injury, death, property damage, and other losses, and I assume all of those risks.
3. I am legally competent to understand and accept the associated risks.
4. I waive, and release the City, its officials, employees, and volunteers from, all claims for any injury, death, property damage, or other loss resulting from my participation in the activity, and/or that of my child/children/guardians.
5. I am responsible for payment of all fees for, and liabilities and damages resulting from, my participation in the activity and/or that of my child/children/guardians, including damages to City property, injury to other participants, or other losses of any kind.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my willful misconduct, and/or that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that such photographs and film will be the sole property of the City and that neither I nor my child/children/guardians will be entitled to any license fee or royalty for the City's use thereof.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed and implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission related to the activity.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use of rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.
13. The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. Although the City is following recommended steps by County health officials, the City cannot protect participants and their family against all possible risks of COVID-19. I understand and acknowledge that participants are encouraged to wash their hands frequently and must take all necessary steps to protect their health consistent with federal, state, and county public health guidelines. By participating in the activity, potentially being exposed to others who might have COVID-19, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child or children and I may be exposed to or infected by COVID-19 and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I am signing a full release of any and all liability against the City of Chino and do so of my own free will.

Printed Name: _____ Parent/Guardian

Signature: _____ Date: _____

Address: _____

Phone (day): _____ Phone (evening): _____ Phone (cell): _____

Organization (if any): _____

***** **FOR OFFICE USE ONLY** *****

Staff member printed name: _____ Date: _____

VENDOR PERMIT APPLICATION

13220 CENTRAL AVENUE CHINO, CA 91710 (909) 334-3263 FAX (909) 334-3727
 MAILING ADDRESS: P O BOX 667 CHINO, CA 91708-0667

CITY OF CHINO
 FINANCE
 DEPARTMENT

BUSINESS INFORMATION

Company Name: _____

Address: _____

Mailing Address: _____

Phone: _____

FAX: _____

Emergency Phone (After hours): _____

Contact Person: _____

Email Address: _____

Website Address: _____

OWNER/OFFICER INFORMATION

Name: _____

Title: _____

Name: _____

Title: _____

Drivers Lic. # _____

Social Sec. # _____

Drivers Lic. # _____

Social Sec. # _____

Type of ownership (select one):

SOLE OWNER**PARTNERSHIP****CORPORATION****LLC****CORPORATE INFORMATION (Please complete this section if you are a corporation, or if your corporate offices are located elsewhere).**

Corporate name: _____

Federal Employer's ID# _____

State ID# _____

Address: _____

Phone: _____

FAX: _____

NAME OF EVENT: _____

EVENT LOCATION: _____

DATES OF EVENT: _____

SALES TAX PERMIT #: _____

COUNTY OF SAN BERNARDINO HEALTH PERMIT #: _____

NON-PROFIT # (IF APPLICABLE): _____

PLEASE DESCRIBE YOUR BUSINESS ACTIVITY IN DETAIL _____

I hereby certify that the information provided on this form is true and correct to the best of my knowledge and ability. I acknowledge that applying for a business license does not guarantee the right to conduct any business activity that is in violation of any city code. All permits required from city departments must be obtained before any business activity will be allowed.

Signature: _____

Print Name: _____

Date: _____