Event Vendor Application Checklist

Circle one: Food Vendor  Non-Food Vendor

| | Event Vendor Application

| | Signed Application for Business Sub-License

| | Copy of Temporary Sales Tax Information/Number. If needed please feel free to contact State of Utah Special Event Tax Division-210 North 1950 West, Salt Lake City, UT 84134, 801-297-6303

| | Evidence of General Liability Insurance that is acceptable to the city. Insurance is required when the event is held at a City Facility, Park, Road Closure or sidewalk closure

| | Sign Vendor Release Waiver and Indemnification Agreement

| | Copy of current Temporary Food Service Permit or Permanent Food Service Permit. If needed please feel free to contact Southwest Utah Health Sept. -620 South 400 East #400, St. George, UT 84770, 435-986-2580

| | Copy of current Food Handlers Permit

| | Fees paid (If paying by check make payable to “City of St. George”)

Submitted completed application packet to: Leisure@sgcity.org

If you have any questions call 435-627-4500
LEISURE SERVICES
220 N 200 E ST GEORGE UTAH 84770
435-627-4500

*EVENT VENDOR APPLICATION FORM*

$50 PER SITE PER DAY

Date of Submission ________________________________

Name of Organization/Tournament ________________________________

Business Name ________________________________

Address ________________________________

Contact/Phones #’s ________________________________

Email Address ________________________________

<table>
<thead>
<tr>
<th>Locations</th>
<th>Dates</th>
<th>Times</th>
<th>Purpose</th>
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What does your business plan to sell/give at the event?
St. George requires an organization representative to be at each event site. Please provide their name and phone number.

Site __________________ Name __________________ Phone ______________

Site __________________ Name __________________ Phone ______________

Site __________________ Name __________________ Phone ______________

St. George requires the organization to list all banners and size/dimensions and locations that will be at the event. The organization may be limited on banners due to City ordinances.

Site __________________ Size ______________

Site __________________ Size ______________

Site __________________ Size ______________
APPLICATION FOR BUSINESS LICENSE
(Lessee Sub-License)

Event Name: ____________________________ Date: __________________
Name of Business: _______________________ Business Phone: ___________
Name of Applicant: ______________________ Home Phone: _______________
Residence Address: _______________________
Mailing Address (If Different): __________________________
Temporary Special Event Sales Tax Number: _______________________
Applicants Driver’s License Number: __________________________ State: ______
Location of Sales Point (booth or stall, if numbered): _______________________
Product or Service Sold: __________________________
Name of Salesperson (if Not Applicant): __________________________

If Corporation of Partnership, Give Names and Address of Officers of General Partners:
_____________________________________________________________________
_____________________________________________________________________

LICENSE FEE PAYABLE:

Five (5) Day License Fee $5.00 $_______
Thirty (30) Day License Fee $10.00 $_______

TOTAL $________ (make payable to: City of St. George)

I understand that falsifying any information on this application constitutes sufficient cause for rejection or revocation of my license. I also understand that the City License Officer may require additional information as permitted by the ordinance, and I also agree to supply the same part of this application.

Application Completed by (please print) __________________________ Title ____________

Authorized Applicant Signature __________________________ Date ____________

Office Use Only
Date Received: __________ Receipt Number: __________ Business L.O.: ______
GUIDELINES:

1. **Booth Equipment**: Food and Non-Food Vendor. All vendor must provide all booth materials including canopies, cooking equipment & supplies, floor coverings, grease catchers, extension cords, tables, chairs, eating utensils, serving utensils, napkins, plates, cups, sunshades, decorations, price list, signs, etc.

2. **Food Handlers Permit**: REQUIRED FOR ALL FOOD VENDORS. All vendors shall display a copy of a current or temporary Food Service Permit on their booth.

3. **Compliance with Law**: All vendors agree to strictly observe all laws and ordinances of the State of Utah, Washington County Health Department, and the City of St. George, which in any respect relate to the business conducted by vendor/exhibitor, together with all rules and regulations. No smoking. Consumption or selling of alcoholic beverages is prohibited on City property. The City shall have the right to inspect at all reasonable times the premises occupied by vendor/exhibitor. Willful violation of or failure to comply with any of said laws or regulations shall be cause for cancellation of this agreement by the city.

4. **Trash Receptacles**: All vendors must provide plastic bags to place in trash cans near your booth. You will be responsible for cleaning your own immediate area throughout and at the end of each day and bagging your garbage. **All liquid or solid waste must be disposed of properly. Do not dump into the storm drain.**

5. **General Liability and Property Damage Insurance**: All vendors must provide a Certificate of General Liability and Property Damage Insurance, showing that the applicant has comprehensive general liability and property damage policy that includes contractual liability coverages. **The City shall be named as an additional primary insured.** The minimum general liability and property damage liability shall be as follows:
   - (a) Comprehensive general liability insurance for injuries, including accidental death, to any one person in any one occurrence in an amount not less than $1,000,000
   - (b) Comprehensive general liability insurance for injuries, including accidental death, two or more persons in any one occurrence in an amount not less than $3,000,000
   - (c) Broad form property damage insurance in an amount not less than $295,000 per occurrence.

6. **Taxes, permits, certificates and any licenses required are the responsibility of the vendor.** The City of St. George reserves the right to limit the number and type of exhibitors or vendors.

**EVENDOR RELEASE WAIVER AND INDEMNIFICATION AGREEMENT**

This Release, Waiver, and Indemnification Agreement is hereby given by ___________________________ ("Indemnitor"), on the one hand, in favor of The City of St. George, Utah: (hereinafter the “EVENT”); (“indemnities”) and all other sponsors, donors, volunteers, organizers, and fundraisers.

**Recitals**

A. Indemnitor is a vendor at the EVENT, at properties owned, managed, controlled, or administered by the City of St. George, Utah.

B. Indemnitor recognizes the potential for risk of harm to persons and property at the City of St. George, and

C. Indemnitor desires that Indemnifiees not be at risk for activities of the Vendor at the EVENT, including the activities of Indemnitor.

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Indemnitor covenants as follows:
Agreement

1. Indemnitor hereby releases Indemnitees and forever waives Indemnitor’s claims against Indemnitese for any and all claims, causes action, damages, demands, penalties, and costs, including attorney fees that arise in relation to the EVENT.
2. Indemnitor acknowledges that this Release applies to all claims or causes of action which currently exist or which have existed or which may arise or are discovered in the future in relation to Indemnitor’s activities at the EVENT.
3. Indemnitor intends this to be a complete and total release of all claims, whether known or unknown, fixed or contingent, or whether the facts hereafter prove to be other than or different than the facts known by the Indemnitor or believed by Indemnitor, and this Release and Waiver shall be construed as broadly as the law allows to accomplish this stated intention.
4. Indemnitor represents and agrees that no legal action of any kind will be taken against Indemnitees by them in relation to the EVENT.
5. Indemnitor shall indemnify and hold Indemnitees harmless for any and all claims, demands, losses, costs, obligations, and liabilities Indemnities may incur or suffer in direct or indirect relation to Indemnitor’s acts or omissions at the EVENT.
6. Indemnitor shall also indemnify and hold Indemnitees harmless from any and all claims, demands, losses costs, obligations and liabilities that Indemnitese may incur or suffer as a result on Indemnitor’s breach of any agreement, covenant or warranty in this agreement. Indemnitor shall further indemnify and hold Indemnitees harmless from any and all liabilities, claims, and causes of actions arising from the operation of the EVENT. The indemnity obligations of this paragraph shall include indemnity for reasonable attorney fees and court costs incurred.

This Agreement shall be governed by the laws of the State of Utah and shall be binding upon Indemnitor’s heirs, successors, agents or assigns and shall be for the benefit of (i) Indemnitese, their employees, officers, agents, affiliate, agents and assigns and (ii) all City of St. George employees, volunteers, donors, sponsors, organizers and fundraisers.

DATED this ______________ day of ______________________, 20____

By: ______________________________

Title: ______________________________
**ACORD**

**CERTIFICATE OF LIABILITY INSURANCE**

**PRODUCER**
Insurance Producer Name, Address, Phone number

**INSURED**
Insured name or DBA with address

**INSURERS AFFORDING COVERAGE**

<table>
<thead>
<tr>
<th>INSURER A</th>
<th>Name of Insurance Company</th>
<th>NAIC #</th>
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<tbody>
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<td># must be included</td>
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**COVERAGES**

The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.

<table>
<thead>
<tr>
<th>POLICY</th>
<th>EACH OCCURRENCE</th>
<th>LIMITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAMAGE TO RENTED PREMISES (Each occurrence)</td>
<td>$1,000,000</td>
<td></td>
</tr>
<tr>
<td>MED EXP (Any one person)</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>PERSONAL &amp; ADV INJURY</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>GENERAL AGGREGATE</td>
<td>$3,000,000</td>
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<tr>
<td>PRODUCTS - COMPO/OP AGG</td>
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**GENERAL LIABILITY**

<table>
<thead>
<tr>
<th>TYPE OF INSURANCE</th>
<th>LIMITS</th>
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<tbody>
<tr>
<td>CLAIMS MADE</td>
<td>$1,000,000</td>
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<tr>
<td>OCCUR</td>
<td>$</td>
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</table>

**AUTO LIABILITY**

<table>
<thead>
<tr>
<th>TYPE OF INSURANCE</th>
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<tbody>
<tr>
<td>ANY AUTO</td>
<td>$</td>
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<tr>
<td>ALL OWNED AUTOS SCHEDULED</td>
<td>$</td>
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<tr>
<td>AUTOS Hired AUTOS</td>
<td>$</td>
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<tr>
<td>NON-OWNED AUTOS</td>
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**GARAGE LIABILITY**

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<tbody>
<tr>
<td>ANY AUTO</td>
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**EXCESS/UMBRELLA LIABILITY**

<table>
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<tr>
<th>TYPE OF INSURANCE</th>
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<tbody>
<tr>
<td>OCCUR</td>
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<tr>
<td>CLAIMS MADE</td>
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**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY**

<table>
<thead>
<tr>
<th>TYPE OF INSURANCE</th>
<th>LIMITS</th>
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<tbody>
<tr>
<td>WE STATUTORY</td>
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<tr>
<td>OTHER</td>
<td>$</td>
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<tr>
<td>E.L. EACH ACCIDENT</td>
<td>$</td>
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<tr>
<td>E.L. DISEASE - EA EMPLOYEE</td>
<td>$</td>
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<tr>
<td>E.L. DISEASE - POLICY LIMIT</td>
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**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSION / ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**

City of St. George is listed as an additional insured with respect to (name of insured) participation in: (name, date, and location of event) The City of St. George is Primary & Non-Contributory for Ongoing & Complete Operations; a Waiver of Subrogation applies in favor of the City of St. George. A 30 day Notice of Cancellation will be provided should any of the above described policies be cancelled before the expiration date.

**CERTIFICATE HOLDER**
City of St. George
Attn: 175 East 200 North
St. George, UT 84770

**CANCELLATION**

Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 DAYS written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

**Signature of Agent**

**AUTHORIZED REPRESENTATIVE**