## Highlands Business Partnership 23<sup>rd</sup> Annual Oktoberfest!

## Saturday, October 5<sup>th</sup>, 2024, 12 - 7PM Veterans Park

(Rain Date: Sunday, October 8) Attendance – Approx. 5,000 people. An authentic German experience- German Food, Beer and Oompah Bands.

Novelty Food Vendor Fee \$250.00 fee Includes 10x10 space and electric APPLICATION DEADLINE – September 27th, 2024. Fee is \$300 after deadline.

| Please Print Name:                                            |        |      |  |
|---------------------------------------------------------------|--------|------|--|
| Business Name:                                                |        |      |  |
| Address:                                                      |        |      |  |
| City:                                                         | State: | Zip: |  |
| Phone:                                                        | Fax:   |      |  |
| E-mail:                                                       | Web:   |      |  |
| List <b>all</b> items to be sold and hbpadmin@highlandsnj.con | 9 .    | ·    |  |
|                                                               |        |      |  |

Required with application: (PLEASE DO NOT APPLY FOR FIRE PERMIT OR BOH CERTIFICATE UNTIL APPROVED AS A VENDOR!)

- Copy of Application for Fire Permit to the Borough of Highlands <u>MUST SEND TO THE</u> <u>BOROUGH TWO WEEKS PRIOR TO EVENT</u>
- Copy of Board of Health Certificate <u>MUST FILL OUT AND SUBMIT THE ATTACHED MCRHC</u> FORM TO THE BOROUGH TWO WEEKS PRIOR TO EVENT
- Certificate of Insurance with additional insured:
- 1) Highlands Business Partnership
- 2) Borough of Highlands
- 3) Oktoberfest, October 5, 2024, Rain date, October 6, 2024, Veterans Park, Highlands, New Jersey Certificate Holder: Highlands Business Partnership, 140 Bay Ave., Highlands NJ 07732

| <u>Nar</u>                                                          | ne each appliance used:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>How many Amps?</b>                                                                                                                                                                            |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                  |
| 2                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                  |
| 3                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                  |
| 4                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                  |
|                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | TOTAL AMPS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                  |
| sho<br>the<br>hou<br>app<br>ow<br>If you<br>will<br>HB<br>ma<br>cou | n applying to participate as a vendor in applying to participate as a vendor in a.w. I may not be accepted to this show promoter. If accepted, I agree to be sours of the event and to offer only the proved by HBP. I will keep my area of a TABLES, TABLECLOTHS, LIGHTS ou are using fryers, you MUST have plust dispose of oil accordingly and take we enforce grease regulations and fines of the provided in the provided by HBP are final. No refunds and find terminate my relationship with HBP 40 fee for returned checks. | . Acceptance in the control of the c | s at the discretion of and open during all ove that are must supply their R extension cord. ding your area. You brough of Highlands those in violation. It that all decisions by the above rules |
| Sign                                                                | nature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | :                                                                                                                                                                                                |
|                                                                     | Mail Check or Money (<br>Highlands Business Partnership, 140 Ba<br>Phone 732-291-4713 ~ wy                                                                                                                                                                                                                                                                                                                                                                                                                                          | ıy Avenue, Highl                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ands, NJ 07732[E]                                                                                                                                                                                |