

Highlands Business Partnership
2012 Clamfest Novelty Food Vendor Application
Huddy Park ~ RAIN or SHINE ~ Application Deadline July 6, 2012

Thursday, August 2nd 6 pm to 11 pm
Friday, August 3rd 6 pm to 11 pm
Saturday, August 4th 12 pm to 11 pm
Sunday, August 5th 12 pm to 8 pm

**Four-day event with Local Seafood Restaurants, Live Entertainment,
Specialty Vendors, Thrill Rides, Games and Much More!**
Attendance – Approx. 20,000 over the 4 days.

HBP Novelty Food Vendor Fee: \$600.00. Includes 10”W x 20’D space with electric (120 Volts with 20 AMPS). Ice Available at \$3 ea. Plus

PLEASE PRINT

Contact Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Web: _____

New Jersey Sales Tax # _____ (Enclose a copy of your NJST certificate.)

**LIST ALL ITEMS TO BE SOLD: MENU ITEMS CANNOT BE DUPLICATED AND WILL BE
SELECTED ON A FIRST COME FIRST SERVE BASIS.**

Required with application:

- Copy of Application for Fire Permit to the Borough of Highlands
- Copy of Board of Health Certificate
- Certificate of Insurance with:
Additional Insured: 1) Highlands Business Partnership, 2) Borough of Highlands,
3) Clam Fest August 2– August 5, 2012, Huddy Park, Highlands, New Jersey
Certificate Holder: Highlands Business Partnership, PO Box 375, Highlands NJ 07732

Name each appliance used:

How many Amps does it use?

1	<u>electric lights</u>	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
	TOTAL AMPS	_____

I am applying to participate as a vendor in the above-mentioned promoter's show. Acceptance into the show is at the discretion of the promoter. If accepted, I agree to **be open during all hours of the event and offer only the items from above that are approved by HBP.** I will keep my area clean. **All vendors must supply their own TABLES, LIGHTS and OUTDOOR extension cord.** If you are using frying oil, you **MUST** be sure not to spill it on the ground when cooking. When the event is over you are required to dispose of it on your own. If there are any remains on the ground, the Borough will be issuing fines. HBP is not responsible if you receive a fine. I understand that **all decisions made by HBP Events committee are final.** Failure to abide by the above rules could terminate my relationship with HBP and any other events and no refunds will be made. There is a \$25 fee for returned Checks.

Signature: _____ Date: _____

**Mail Check or Money Order Payable to:
Highlands Business Partnership, PO Box 375 Highlands, NJ 07732
Phone 732-291-4713 ~ Fax 732-872-1031 ~ www.highlandsnj.com**

Rev. 10/11 For HBP use: App. Rec. _____ Ck# _____ \$_____ Accepted _____ Not _____