



Fair Dates June 17-20, 2010

Food Concession Application
Completion does not mean acceptance

Today's Date: \_\_\_\_\_

Company: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Contact Person: \_\_\_\_\_
Email: \_\_\_\_\_
Phone Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Fax.: \_\_\_\_\_
Minnesota State Tax ID Number: \_\_\_\_\_
Insurance Company Name: (Not agent) \_\_\_\_\_
Policy Number \_\_\_\_\_

REMEMBER TO INCLUDE: CERTIFICATE OF INSURANCE
DEPARTMENT OF REVENUE FORM ST19

Use this space to list all food products to be sold:

Four horizontal lines for listing food products.

Every vendor needs to fill out an itinerant form, (see forms on www.hennepincountyfair.com) even if you have a state license. There is no fee for state license holders.

Space Rental Costs:

ELECTRICAL Choice of:

110 / 20 amp service each \$25.00 # needed \_\_\_\_\_
220 / 30 amp service each \$45.00 # needed \_\_\_\_\_
220 / 50 amp service each \$55.00 # needed \_\_\_\_\_ Total \_\_\_\_\_

SPACE

Include trailer hitch when measuring Trailer length: # of feet = \_\_\_\_\_ at \$20.00/foot. Total \_\_\_\_\_

ADVANCE SALE TICKETS

Adults # needed \_\_\_\_\_ @ \$7.00ea \$ \_\_\_\_\_
Children # needed \_\_\_\_\_ @ \$5.00ea \$ \_\_\_\_\_

EVERYONE ENTERING THE GROUNDS WILL NEEDED A TICKET EACH DAY
NO EXCEPTIONS WILL BE MADE

SANITATION FEE

\$ 30.00

PAYMENT IN FULL DUE ON OR BEFORE May 1, 2010

TOTAL \$ \_\_\_\_\_

After May 1, 2010 the rate increases to \$25.00/foot

I understand this application will be accepted on a first come basis. I have read and understand and agree to the rules and regulations so stated in this contract.

Signature: \_\_\_\_\_ Title \_\_\_\_\_

Make check payable to: Hennepin County Fair
Mail to: P O Box 36, Hamel, Mn. 55340