



First Friday Series & Octoofest

2016 Vendor Application

Please check dates you will be participating (the "Event(s)"): _____

- _____ June 3th: Here Comes the Sun FF
- _____ July 1st: Bicentennial FF
- _____ Aug. 5th: Come Down to Recycle Town FF
- _____ Sept. 2nd: Back to School FF
- _____ Oct. 29th: Octoofest

\$50 fee per event if vending food

\$35 fee per event all other vendors

First Fridays 6-9pm – Setup begins at 4:30pm

Octoofest 10-2pm – Setup begins at 8:30am

Business Name: _____

Description: _____

Contact Name: _____

Phone Number: _____ Email Address: _____

Do you have current liability insurance? _____ What insurance carrier? _____

Does your display have special needs? If yes, explain:

Vendor License Number: _____

Please submit the following documents with this application:(1) a photocopy of vendor's license (ALL) and (2) a valid certificate of insurance certificate naming DPI as an additional insured (FOOD VENDORS ONLY).

NOTE: All exhibitors must have a transient vendor's license.

For information, call the Ohio Department of Taxation at 1-888-405-4089 or www.tax.ohio.gov

Agreement to Participate:

I understand that Downtown Perrysburg, Inc. (DPI) is providing me with a 12'x12' sidewalk space for the dates chosen above, and it is my responsibility to set up and tear down the area provided. I agree to maintain the space in a safe, professional manner. DPI, the City of Perrysburg (the "City"), and their representatives are not responsible for any injuries, property damage, or items broken or lost during the Event, and I waive all claims against DPI, the city, and their representatives for any such injuries or damage. I understand no refunds will be offered due to inclement weather. I will handle my own sales and taxes. I and/or my Business will defend, indemnify, and hold DPI, the City, and their representatives harmless from and against any and all claims, loss, damage, liability, cost or expense (including attorneys' fees) for any bodily injuries or property damage that relate in any way to my designated booth space, items sold or provided by the Business at the Event, or any negligent, reckless, or intentional acts by me or any representatives of the Business at the Event.

I am providing you with payment in full (**make checks payable to Downtown Perrysburg, Inc.**) and will mail this form, payment, and a photocopy of my vendor's license and, if applicable, an insurance certificate to:

**Downtown Perrysburg Inc. – Jayme Finkler
PO Box 83
Perrysburg, OH 43552**

www.downtownperrysburg.org

419-872-6246

downtownperrysburg@gmail.com

Authorized Signature
(on behalf of myself and the Business identified above)

Date