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Permit Issued / /

2020 VENDOR APPLICATION

Special Event Organizer is responsible to manage and submit all applications **2 Weeks prior to the Event Date**

City of Bethlehem

Attention: Recreation Department

10 East Church Street
Bethlehem, PA 18018

Email: VendorApp@bethlehem-pa.gov

Phone: 610-865-7081

Application Submitted ___/___/___

Check Amount \$ _____

Check # _____

Date Received ___/___/___

Received By _____

Event Information

Event Title: _____

Event Date: _____ Rain Date: _____

Event Location/Address: _____

Event Start Time (include set-up): _____ Vendor Operating days/times: _____

Event End Time (include clean-up): _____ Same as Event

Event Organizers: _____

Event Contacts: _____ Email: _____ Phone #: _____

Signature of Event Organizer: _____

Applications will not be accepted without signature

Vendor Information

Vendor: _____

Business Name (As registered with the Tax Bureau): _____

Vendor Contact Name: _____

Business Address: _____

Business Phone: _____ Email: _____

Food or Beverage sale: Retail Merchandise sale: Description: _____

Vendor Location: _____

Is the vendor location any of the following: Private Property Public Right of Way City Park

If operating in a Metered or Permitted parking area, signature from the Parking Authority is required below:

Signature of Parking Authority: _____ Date: _____

Business Privilege License Number: _____ attach a current copy

Business Privilege is a requirement for ALL VENDORS operating in the City of Bethlehem. Please refer to "Where Do I Go For HELP" section at the end of the application.

Health and Safety

Food Product to be served: _____

Site of Food Preparation (Please be specific if not on site): _____

Site of Food Storage: _____

Cooking/Heating/Warming required: YES NO **Selling any food, beverage or other items?** YES NO

Heating Mechanism: Grill Sterno Hot Plate Crock Pot Other _____

Source of Heat/Fuel Type: Electric Propane Wood Other _____

**When serving food a Health Permit and Cooking Permit may be required. Please refer to the "Where Do I Go For HELP" section at the end of the application.*

Worker's Compensation Insurance: (check applicable box)

Vendor maintains Worker's Compensation Insurance as required to the provisions of Pennsylvania's Workers Compensation Law

Vendor Does Not maintain Worker's Compensation Insurance because it is not required pursuant to the provisions of the Pennsylvania's Workers Compensation Law

CHECKLIST OF VENDOR REQUIREMENTS

Event Organizer Approval: To be obtained whenever vendor is part of a larger event (i.e. vendor is not the organizer)

Necessary Items: Signature of Event Organizer

Tax License: To be obtained whenever selling items at the event

Necessary Items: Will you be selling items Yes No
 Include a copy of your Valid Business Privilege License

Health Permit: To be obtained whenever food/beverage/ice are being served to the public (regardless of cost)

Necessary Items: ServSafe Manager Certification (if event is more than 1 day)
 Copy of Department of Agriculture or Other Health Dept. License (When preparing off-site)
 Appropriate Fee: |One Day- \$26.00
|Two- Three Day- \$41.00
|Four or More days- \$76.00

Cooking Permit: To be obtained whenever there is heating/cooking/warming of food product

Necessary Items: Copy of Insurance Certificate –(General Liability- \$1,000,000-listing City of Bethlehem Employees and Officers as additional insured.)
Appropriate Fee: |\$15.00 Review Fee
|\$35.00 Inspection Fee (upon discretion of the Fire Marshal)

Public Right of Way: To be obtained whenever items are placed, or activities are within the Public Right of Way

Necessary Items: Copy of Insurance Certificate (General Liability- \$1,000,000-listing City of Bethlehem Employees and Officers as additional insured.)
 Sketch showing proposed location within the Public Right of Way
 Approval/Permission letter from the Property Owner
 Signature of Parking Authority, if within a Metered or Permitted Parking Area
Appropriate Fee: |Extension of Business or paid on Special Event Permit- No Fee
|\$100.00

VENDORS MUST be set up and ready for inspection a Minimum of ONE HOUR prior to the start of the event; vendors not inspected Will not be permitted to Vend.

Where Can I go for HELP

Health Bureau	Health Bureau Permit	610-865-7083
Fire Department	Fire Department	610-865-7143
Engineering Bureau	Engineering Bureau	610-865-7063
Bethlehem Parking Authority	BPA	610-865-7123
Tax Bureau	General Questions	610-865-7022
Tri-State Financial Group	Business Privilege License/ Mercantile License	610-270-9520

Certification/Hold Harmless/Insurance Clause

Vendor, his/her/their successors, assigns, heirs, executors and administrators shall defend and hold harmless the City from claims or liability, contingent and otherwise for injury to or death of any person or persons or damage to real or personal property arising from or by reason of or in connection with the vendor's negligence, whether sole or joint and vendor shall pay all judgements, interest, costs, legal and other expenses arising out of or in connection herewith. Vendor shall furnish the City with proof of such insurance and coverage limits, with additional coverage terms and conditions that may be required by the City, in compliance with applicable ordinance and regulations issued by the Director of Recreation. Vendor warrants that it is and will be at all times during said event in full compliance with all applicable laws, regulations and ordinances. Vendor has read the above Hold Harmless/Insurance/ Clause and executes same warrants that the undersigned is duly authorized to act for the vendor as set forth herein. The foregoing statements are true and correct to the best of the undersigned's knowledge, information and belief, and are made to induce the City of Bethlehem to approve the within Special Event Vendor Application. I understand that false statements herein are made subject to the penalties of 18Pa.C.S.A.. S4904 relating to "Unsworn Falsification to Authorities."

Vendor has read Certification/Hold Harmless and herein executes same and warrants the undersigned is duly authorized to act for the vendor as set forth herein.

Applicant Name (Print) _____

Signature _____ **Date** _____

Property Owner of Parcel: _____

***Event Organizer – Please submit ALL Applications at one time for each event**

***Payment is only accepted when the permits are pick-up**