



2020 SNACK FOOD VENDOR APPLICATION King of the County BBQ Challenge & Music Festival

Saturday June 20, 2020 10 am to 6 pm

Sunday June 21, 2020 10 am to 5 pm

10' x 10' Space \$350 -or- 10' Corner \$400

Health Department Fee (additional) \$120

Martinez Waterfront Park

If your food is made or packaged outside of Contra Costa County, please attach the following: Restaurants and Caterers provide your Home County Health Permit. All others, provide a State Certificate as a Food Producer. If you have a food truck/trailer, provide a Trailer Health Certificate.

PLEASE PRINT

EXHIBITOR NAME _____ BUSINESS NAME _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOME PHONE _____ CELL PHONE _____ FAX NUMBER _____

EMAIL _____ WEBSITE _____ CALIFORNIA RESALE LICENSE # _____

MERCHANDISE TO BE SOLD _____

VEHICLE LICENSE PLATE NO _____ VEHICLE TYPE AND COLOR _____

I understand that neither the Martinez Chamber of Commerce, sponsoring organizations, city or owner/managers of the show site are responsible for lost, stolen or damaged equipment or merchandise or accident/injury to me or my staff and do hold harmless any of the above individuals or businesses for any and all liability. This is a family oriented event and all merchandise and signage should be appropriate for such an event.

THIS EVENT IS HELD RAIN OR SHINE. NO REFUNDS

EXHIBITOR SIGNATURE _____ (MUST BE SIGNED TO BE ACCEPTED) _____ DATE _____

PAYMENT INFORMATION

Payment can be made by check, money order, cashier's check or credit card. Payment will be processed upon acceptance. ***Please make checks payable to the Martinez Chamber of Commerce.***

_____ I have enclosed a check in the amount _____.

_____ Please charge my credit card in the amount of _____.

_____ MasterCard

_____ Visa

CARD NUMBER _____ CVS CODE _____ EXPIRATION _____

_____ ZIP CODE _____

CARDHOLDER SIGNATURE _____

MAIL COMPLETED APPLICATIONS BY MAY 15, 2020. A \$50 LATE FEE WILL BE ASSESSED IF MAILED AFTER MAY 15, 2020 FINAL DEADLINE – MAY 15, 2020 * Please make sure to include all permits, State Certificate or Trailer Health Permit

QUESTIONS? Please contact us at (925) 228-2345 or info@martinezchamber.com
603 Marina Vista, Martinez, CA 94553 FAX (925) 228-2356 www.MartinezChamber.com

THANK YOU FOR YOUR PARTICIPATION!

To be Completed by EACH Food/Beverage Booth/Truck Vendor/Operator and submitted to Event Coordinator

VENDOR/OPERATOR INFORMATION		
Name of Event:	Date (S):	Event Set Up Time (S):
Event Location:		On Site Contact Person:
Name of Booth, Organization or Company:	Mobil Food Truck License #	On Site Phone#:
Mailing address, City, Zip of Vendor/Operator:		E-mail address of Vendor/Operator:
TYPE: <input type="checkbox"/> For profit <input type="checkbox"/> Non-profit <input type="checkbox"/> Veteran Exempt <input type="checkbox"/> C.C. County Food Truck <input type="checkbox"/> Out of County Vendor/ Food Truck - provide home county health permit <input type="checkbox"/> CFO		

Type of all food/beverage to be sold or given away: (Include beverages, ice, condiments, or attach a menu).

Source(s) of all food/beverages purchased/prepared: Name of Restaurant, Caterer, Cottage Food Operator, BevMo, Cosco, Safeway, etc.

Type of holding/cooking equipment to be used: (i.e: ice chest, barbeques, fryers, chafing dishes, steam table, etc.)

Checklist Completed by Food/Beverage Booth Vendor/Operator

Pre Packaged Food/Beverages Only

All food/beverages will be prepackaged and no food preparation will be conducted in the booth.

Overhead protection and approved floor cover will be on site because I am selling prepackaged food/beverages only. Yes No

Non Pre Packaged Food/Beverages

- 1. I understand I **can not** prepare food/beverages at home. Yes No
- 2. I am preparing **all food/beverages on-site** Yes No
- 3. I am preparing all food/beverages in an approved commissary/production kitchen. Yes No
- 4. Name & address of commissary/production kitchen: _____
- 5. I am preparing approved foods in my CC County registered/permitted Cottage Food Operation (attach permit copy). Yes No
- 6. I will provide an accurate probe thermometer to measure the hot and cold holding of potentially hazardous food during all times of booth operation. Yes No

I am providing the following minimum hand washing facilities:

- 7. Water supply dispenser (5-10 gallons) with hands free spigot. Yes No
- 8. Booths with open food/beverage preparation will be required to have water temperature of 100°F for hand washing. Yes No
- 9. One separate tub (bucket or basin) for collection of rinse/waste water. Yes No
- 10. Pump style soap container. Yes No
- 11. Paper towels & trash receptacle. Yes No

I am providing the following items within my booth for the sanitary cleaning of food preparation utensils:

- 12. Three (3) compartment container (basin 6-8 inches minimum); (1) Detergent & Water, (2) Clean rise water (3) Appropriate sanitizing solution, (4) Test strips for checking sanitizer. See page 4 Yes No

I am protecting the non pre packaged food/beverage preparation areas from insects, dust, and the public by the following method:

- 12. A booth with walls and ceiling constructed either of wood, canvas or other approved materials with fine mesh fly screening, completely enclosing open food areas. Yes No
- 13. A booth with cleanable flooring (concrete, asphalt, tight wood or other similar cleanable material are acceptable). Yes No
- 14. Food/beverage supplies will be stored at least 6 inches off the ground. Yes No

I have read the handout on Requirements for Temporary Food Facilities and will follow the guidelines provided in this handout.

Completed by (signature): _____	Date: _____
Please print name: _____	
Event Coordinator: _____	Date: _____