#### 27<sup>th</sup> ANNUAL SOUTHBURY CELEBRATION 2025! SATURDAY, SEPTEMBER 6<sup>th</sup>, 2025 RAIN DATE IS SUNDAY, SEPTEMBER 7<sup>th</sup>, 2025 ONLY WANT TO BE ON THE WAIT LIST FOR THE RAIN DATE? FOLLOW SAME PROCEDURE TO APPLY MUSIC!! FOODCOURT!! FIREWORKS!! FUN!!

### ATTN: FOOD TRUCKS/ VENDORS & COMMUNITY ORGANIZATIONS YOU ARE INVITED TO PARTICIPATE IN THIS TOWN-SPONSORED COMMUNITY EVENT AS A FOOD VENDOR

#### **GENERAL INFORMATION**

**EVENTS:** Music, Food Court, & Fireworks

TIME: 4:30 PM – 9:00 PM Food Court

- 4:30 PM 8:15 PM Music and entertainment
- 8:15 PM 8:45 PM Fireworks Display
- LOCATION: Southbury Training School Field at Lake Stibbs Route #172, Southbury, CT

# **RULES & GUIDELINES**

- 1. \*\*\*<u>All vendors must be on the field by 2:00pm</u>\*<u>FOOD VENDOR VEHICLES</u> WILL NOT BE ADMITTED ONTO THE EVENT FIELD <u>AFTER 2:00PM</u> – NO EXCEPTIONS \*\*NO REFUND WILL BE PROVIDED IF YOU ARE LATE
- 2. All items must be on-site consumable food items. Vendors can sell multiple food items and no entrees are exclusive to any vendor (i.e. <u>multiple vendors can sell the same food item</u>).
- 3. ALL PRICES NEED TO BE CLEARLY DISPLAYED IN BOLD 2" LETTERING.
- 4. Food vendor spaces will be assigned at check-in which begins at **12:00pm**. This is dependent on the size of the food truck you provide prior to your arrival on the vendor application.
- 5. The Health Department and State of Connecticut Fire Marshal's Office will conduct event day inspections and may have additional requirements. An inspection failure that cannot be corrected, will result in the vendor being asked to leave the event with no refund.
- 6. Food vendors must have Health Dept. pre-event approval and be ready to serve by 4:00pm. Once inspections are complete, vendor may serve continuously until 9:00pm. Vendors will depart after crowd disperses. Anticipated at 9:15pm or when directed by the Committee.
- 7. Each vendor space is approximately **15'-20'frontage**. Food trucks will have some additional space to accommodate their vehicle. Special allowances will be reviewed, if requested in writing, at time of application.
- 8. Vendor units must be self-contained. The event field has no water source or electrical service. A commercial refrigerated trailer will be available to food vendors at no additional cost. Please advise if you wish to utilize.
- 9. Garbage cans will be on-site for your cleanup. All vendors will be expected to leave your service area clean at the end of the evening.
- 10. Vendors using gas grills or generators **must** be equipped with fire extinguishers. In addition, vendors using deep fryers or oil-based cooking methods **must** have a Class K fire extinguisher.
- 11. You should bring a flashlight or lantern lighting as when the lights are turned off for the fireworks it will be very dark. (You can sell your products during the fireworks show).
- 12. Space is limited. Vendors will be selected on a first come/first served basis. Fees will be returned immediately to those applicants not selected. Final Deadline for applications is **Friday**, **July 25**, **2025** and are subject to space availability.

13. When we receive your Vendor Application, you will be required to <u>immediately</u> contact Housatonic Valley Health District to get their forms to complete for Health Department compliance. Vendors will be separately responsible for payment of any application fees the Health Department may require.

https://hvhdct.gov/environmental-health/food-protection-program/

#### The following two items must be attached to this application:

- Certificate of Insurance in the amount of \$1,000,000.00 liability (or other sum as approved by the Town Southbury) with your application.
- A copy of your **Connecticut Sales Tax Permit** with your application.

# **Vendor Fees:**

Commercial Food Trucks and Commercial Vendors \$150 non-refundable fee per space.

Non-profit organization food Vendors \$50 non-refundable fee per space.

\*New this Year: Checks to secure your spot cannot be accepted until after July 1<sup>st</sup>. Parks and Recreation will send you an invoice reminder in July. If your check is not received by July 31<sup>st</sup>, your reservation will be forfeited. Check received before July 1<sup>st</sup> will be returned to sender.

# 4-1-25

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#### VENDOR APPLICATION DEADLINE FOR APPLICATIONS FOR GUARANTEED INCLUSION IN ALL PUBLICITY IS JUNE 13, 2025. FINAL DEADLINE IS JULY 25, 2025.

Send this application with all necessary attachments to: Southbury Parks and Recreation 561 Main Street South Southbury, CT 06488

Vendor/Organization:			
Contact Person:		Cell	
Address:			
Phone:	E	Email:	
Food Product Description:			
If Food Truck: Truck Size (len	gth & width) Trai	ler Size (length & widt	h)
Generator: Y / N Fuel: Gas / D	iesel / Propane		
If Tent: Size: Quantity	Generator: Y / N Fue	l: Gas / Diesel / Propane	
Prepare for commitment of b	oth dates in case of rain.	Office Use O Check #	nly
Commercial Vendor	\$150.00		
Commercial Vendor	\$ 50.00	( ) Menu ( ) T	ax ID ( ) Insurance Cert
I have read and understar	nd the rules and guidelines of	the event: In	itials
	WAIVER		
I HEREBY, IN THE EVENT OF ACCIDENT CONNECTICUT, THE SOUTHBURY RECREA UNDERSIGNED, HEREBY RELEASES THE T SUITS, CONTROVERSIES, PROMISES, DAM WHICH AGAINST THE TOWN OF SOUTHBU MAY, HAVE FOR, UPON, OR BY REASON HEREAFTER IN CONNECTION WITH MY PA AND/OR THE STATE OF CONNECTICUT. II BE INJURED OR INCUR PHYSICAL HARM OR RESPONSIBILITY FOR MEDICAL COSTS, C HAVE READ THE ABOVE STATEMENT AN HARMLESS THE TOWN OF SOUTHBURY A FROM MY ACTIVITIES ON THE TOWN/STAT	TION DEPARTMENT, SOUTHBURY TRAIN OWN OF SOUTHBURY AND SOUTHBURY T AGES, JUDGMENT, EXTENT, EXECUTION, RY AND/OR SOUTHBURY TRAINING SCHO OF MATTER CAUSE OR THING WHATS RTICIPATION IN ACTIVITIES UPON PREM N PARTICIPATING IN SAID ACTIVITIES, I U DR INJURY AND I ASSUME SAID RISKS OF ARE, TREATMENTS, OR ANY OTHER COS ND I VERIFY I AM IN GOOD HEALTH AN AND/OR SOUTHBURY TRAINING SCHOOL	ING SCHOOL AND/OR THEI TRAINING SCHOOL FROM A CLAIMS AND DAMAGES V OOL BY MYSELF, MY HEIR SOEVER FROM THE BEGIN ISES AND/OR LANDS OWN INDERSTAND THAT THERE F MY OWN FREE WILL KNW TS OR DAMAGES TO ME A D COVERED BY MEDICAL	R AGENTS AND EMPLOYEES. THE LLL ACTIONS, CAUSES OF ACTION, WHATSOEVER IN LAW OR EQUITY S, OR HEREAFTER CAN, SHALL OR INING OF THE WORLD FOREVER ED BY THE TOWN OF SOUTHBURY ARE CERTAIN RISKS THAT I MAY OWING THAT I SHALL BEAR FULL AS A RESULT OF SAID INJURIES. I INSURANCE. I AGREE TO HOLD
Your signature on this applicat	ion is your agreement to abide	by the rules of this	show and constitutes a

contract and insurance waiver.

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

Date:

Print Name:

Questions? Contact Southbury Recreation Department, Monday-Thursday 9am to 4pm; Friday 9am to 1pm at 203-262-0633.