

Sulphur Mardi Gras Festival
Sulphur, Louisiana
Food Vendor Application

Dates of Festival: February 3rd , 2017
Festival Hours: SATURDAY 12:00 – 5:30 PM

1. **Participation** and **location** of the Vendor will be determined and assigned by the Vendor Jury.
2. The vendor is responsible for setting up and tearing down all units he/ she operates at the event. Vendor will provide all equipment, including extension cords and hose, to operate his/her unit. If electricity is required, a \$25 fee will be collected with this application. All vendors will be required to have a fire extinguisher and will be subject to inspection.
3. **ELECTRICITY:** When specifying electricity needs, please keep in mind that 220 will have 50 amps and 110 will have 20 amps. All equipment tied in must be below this amperage. Please check the amperage of your crock pots, etc. prior to the festival. No electrical heaters will be permitted.
4. Application must list EVERY piece of large equipment you will have on the grounds during the festival, including tents, trailers, storage, grills, etc. and size measurements. Everything must fit into the booth area you indicate on your application.
5. Collection of sales tax and submission to the City of Sulphur, the parish, and the state is sole responsibility of the vendor.
6. The City of Sulphur, the Brimstone Historical Society members, Sulphur Parks and Recreation, staff, and volunteers are not responsible for injury to, or the safety of the exhibitor, or the property of the exhibitors from theft, damage by fire, accident or natural disaster, and are hereby released from any and all liabilities.
7. In the event of cancellation due to weather or other factors, no refunds will be issued.

Name of Vendor: _____

Address of Vendor: _____

Phone Number: _____ **(Cell):** _____ **(Fax):** _____

E-mail Address: _____

Food items to be served: (BE SPECIFIC! YOU WILL ONLY BE ALLOWED TO SELL WHAT IS APPROVED)

Setup must be complete by Saturday at 11:30 a.m.

Fees:

10x10 booth (Standard rate): **NONE**

Commercial Trailer: **NONE**

Size of Trailer (including trailer tongue, etc.): Length: _____ Width: _____)

Electricity: \$25 Voltage 220 _____ 110 _____

Water..... Yes _____ No _____

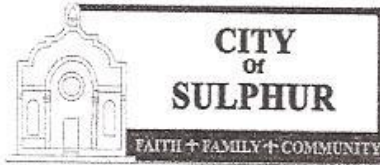
Wastewater Discharge..... Yes _____ No _____

Signature: _____ **(PHONE):** _____

NO APPLICATIONS WILL BE ACCEPTED AFTER January 27th , 2017

**MAIL FORM TO: Mayor's Office
P.O. Box 1309
Sulphur, LA 70664-1309**

**Phone: (337)527-4500
e-mail: mayorsoffice@sulphur.org**



FOR OFFICE USE ONLY
AMT _____
CK# _____
DATE _____
CLERK _____

OCCUPATIONAL LICENSE APPLICATION

- 1. NAME OF BUSINESS _____
- 2. BUSINESS LOCATION _____
- 3. MAILING ADDRESS _____
- 4. LEGAL NAME OF OWNER _____
- 5. HOME/CORP ADDRESS _____
- 6. BUSINESS TELEPHONE _____ HOME/CORP _____

7. TYPE OF ORGANIZATION:
_____ INDIVIDUAL _____ PARTNERSHIP _____ CORP _____ LLC

IF OTHER THAN INDIVIDUAL, GIVE NAMES OF PARTNERS OR PRINCIPAL OFFICERS _____

- 8. OPEN DATE FOR THIS LICENSE _____
- 9. DESCRIBE IN DETAIL THE TYPE OF BUSINESS ACTIVITY OR SERVICE YOU WILL PERFORM _____

I AFFIRM THAT THE INFORMATION GIVEN ON THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT _____
TITLE _____
SOCIAL SECURITY # _____
DRIVERS LICENSE # & STATE _____