



Rental # _____

VENDOR PERMIT APPLICATION

Renters are responsible for all vendor permit applications associated with their event. Complete if fees will be charged, items or services offered for sale, any business will be conducted, or any solicitation will occur at the facility - see Facility Rate Sheet, for additional fees related to fund raising events. Incomplete forms will not be accepted.

APPLICANT INFORMATION

Please complete information below. If you already have an account enter your Login ID (if organization, use Login ID of authorized agent of Organization), Name and Phone Number, then skip to the VENDOR INFORMATION Section.

Organization/Group/Team/Name _____ Login ID _____

Note: Only one vendor/organization per agreement.

Address _____ Town _____ State _____ Zip _____

Phone (H) _____ (W) _____ (C) _____

Contact Person/Coach (authorized agent) _____

Address _____ Town _____ State _____ Zip _____

Phone (H) _____ (W) _____ (C) _____

E-mail _____ Fax _____

VENDOR INFORMATION (Vendor Permits can be valid for 1 year)

Facility _____ Day(s) _____ Date(s) _____

Time(s) _____ (Set-up/take-down must occur during this time)

Is Event open to the public? Yes No

Vendor Name _____

Are you offering this service at the request of the renter? Yes No If Yes, who? _____

Describe all products/services to be offered for sale/advertised for sale _____

Extra security, cleaning, etc. applicant will provide _____

Proceeds from sales to benefit (Describe allocation to charity) _____

Describe details of event, how sales are to be advertised, displayed, and amount of space needed _____

Describe all facilities/tents/units/equipment/etc. to be installed/erected/placed on site as part of this application. (Include sizes, types of installation, etc., including whether any require water/electricity/etc., and how it will be supplied.)

Note: Potable water and electricity are not available at most outdoor sites. Please check before submitting.

Describe any signage proposed, including size, content, location, installation method, etc. _____

Is this a for-profit organization? Yes No

Is this a nonprofit organization? Yes No

A 501(c)3 Organization? Yes No



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RULES & RESPONSIBILITIES

1. ALCOHOL - Alcoholic beverages are not permitted in, or on any Departmental facility or grounds.
2. OTHER FEES - See Facility Rate Sheet for fund raising events. A work sheet will be provided.
3. ORDINANCES - County Parks Ordinances are posted on park/center bulletin boards. Parks and Recreation and/or the County Board of Supervisors reserve the right to refuse a request or to cancel any activity if it is not in the best interest of the County or conflicts with Parks and Recreation philosophy.
4. RULES & REGULATIONS - Rules and regulations shall be adhered to by all persons representing vendor group or organization.
5. CANCELLATIONS - Vendor Permit fees are non-refundable in the event of cancellation
6. VENDOR RESPONSIBILITY - Vendor agrees to assume responsibility for any liability for injury or damage to their person or the property of the user or others, for injury or damage attributed to Fauquier County facilities, personnel and/or property. Fauquier County is not responsible for accident, injury or damage to or loss of property.
7. CLEANING - All Vendors are expected to leave the facility clean and orderly. Vendor is responsible for additional fees if Department incurs unexpected costs.
8. SAFETY - Vendors agree that safety and protection of all persons is paramount and assume the responsibility to ensure that use, installation, maintenance, and inspection of all equipment used and/or left on-site at facilities conforms to government and non-government (voluntary) safety standards and/or guidance as posted by the U.S. Consumer Product Safety Commission and the equipment manufacturer's instructions.
9. AMERICANS with DISABILITIES ACT - Parks and Recreation is committed to making its facilities accessible, usable, and user-friendly to persons with disabilities, and to further the concept of equal treatment for people with disabilities to the maximum extent possible consistent with the Americans with Disabilities Act. Therefore, applicants of Parks & Recreation facilities agree to make all reasonable accommodations for individuals with disabilities and applicants seeking to vend on any Parks and Recreation facility agree to make all reasonable accommodations for individuals with disabilities.

Everything that I have stated on this application is correct to the best of my knowledge. I understand that the Department will retain this application whether or not it is approved. I agree that while we use Parks and Recreation facilities we will not discriminate on the basis of race, creed, color, religion, disability, gender and age. I have read, understand, and agree to abide by the policies, rules and regulations as they pertain to the requested usage.

Signature of Applicant _____ Date _____

DEPARTMENT USE ONLY			
Fee Accepted: _____	By _____	Date _____	
Regional Superintendent Review/Comments: _____			

Approval: Yes <input type="checkbox"/>	No <input type="checkbox"/>	By Director _____	Date _____