



2021 COMMERCIAL TENT VENDOR CONTRACT
NEW JERSEY STATE FAIR
August 7-14, 2021

Return the **COMPLETED, DATED AND SIGNED** contract with appropriate forms, including a check made payable to the “New Jersey State Fair” for **50%** of the contract amount by **March 1, 2021 to reserve a space.** Balance and Insurance is due June 1, 2021. You will receive a signed copy of this contract and invoice confirming your acceptance.

Balance is due June 1, 2021 - Late fee of \$100 will apply.

BUSINESS NAME: _____

CONTACT PERSON: _____

ADDRESS: _____ **CITY:** _____

STATE: _____ **ZIP:** _____ **TELEPHONE :**(_____)_____

CELL PHONE:(_____)_____ **EMAIL:**_____

PLEASE COMPLETE PRODUCT FORM ATTACHED. ALL CHANGES MUST BE SUBMITTED IN WRITING NO LATER THAN JUNE 1, 2021.

COMMERCIAL TENT: The Commercial Tent is a 180’ X 66’ clear span tent. Spaces are 10’ deep with 10’ minimum frontage with 10’ increments. The cost is \$80.00 per front foot which includes one 110V/ 20 amp circuit. Please note that there is a limited number of corner spaces! Please indicate the number of front feet required:

Outside corner (20’ minimum; \$100 premium) _____ feet	PRICE: \$ _____
Inside corner (20’ minimum; \$100 premium) _____ feet	PRICE: \$ _____
Outside row _____ feet	PRICE: \$ _____
Inside row _____ feet	PRICE: \$ _____

ADDITIONAL ELECTRICAL CIRCUITS are priced at \$100 each.

TOTAL NUMBER OF EXTRA CIRCUITS REQUIRED _____ **PRICE: \$** _____

STATE OF NEW JERSEY FIRE SAFETY PERMIT FEE: \$5.00 per 10’ space **PRICE: \$** _____

INSURANCE: Vendors shall obtain and maintain public liability insurance for loss, damage to rented property and personal injury arising from their operations. Insurance Certificate must name the NJSF/SCF&HS as an Additional Insured.

_____ I would like to purchase insurance from the fair for \$150. PRICE: \$ _____

_____ I will provide insurance naming the NJSF/SCF&HS as an ‘Additional Insured’ by June 1, 2021. If not received by June 1, 2021, I will be charged \$150 to be put on the fair’s policy.

NO EXCEPTIONS!

CAMP SITE: Flat fee of \$35.00/night Number of nights _____ PRICE: \$ _____

NEW VENDOR DEPOSIT (SEE NEW VENDOR APPLICATION) PRICE: \$100.00

TOTAL: \$ _____

CREDIT CARD:

Please circle type: American Express Visa MasterCard Discover

Card #: _____ Expiration date: _____

Security code: (found on back of card; front if Amex) _____

Name on card (please print): _____

CHECK: (Payable to: New Jersey State Fair)
(Please note there is a \$25 charge for returned checks)

I have read and agree to all contract stipulations as noted in the New Jersey State Fair® / Sussex County Farm & Horse Show Association Vendor Handbook. All final location assignments are at the discretion of the Concessions Committee. Incomplete contracts will be returned.

****** Covid protocols for vendors will follow as soon as we get guidelines from the state. Due to Covid, The New Jersey State Fair, reserves the right to make any necessary changes for the safety of all involved.**

Signed _____ Date _____
VENDOR

Signed _____ Date _____
NJSF

Please return contract to: New Jersey State Fair
Attention: Concessions Manager
PO Box 2456
Branchville, NJ 07826
concessions@njstatefair.org
973-948-5500 x225
973-948-0147 fax