



**2023 COMMERCIAL VENDOR CONTRACT**  
**NEW JERSEY STATE FAIR**  
**Friday, August 4 at 5PM -12 at 10PM, 2023**

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, 2023 to reserve a space. Balance and insurance is due June 1, 2023.

**BUSINESS NAME:**

\_\_\_\_\_

**CONTACT PERSON:**

\_\_\_\_\_

**ADDRESS:**

\_\_\_\_\_ **CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_ **TELEPHONE**  
:(\_\_\_\_) \_\_\_\_\_

**CELL PHONE:**(\_\_\_\_) \_\_\_\_\_ **EMAIL:**  
\_\_\_\_\_

Please list name and number of anyone else you would like notified with our Emergency Contact System.

\_\_\_\_\_

**SPACE RENTAL:** Spaces are a minimum of 10’ of frontage. Depth will vary on location. All spaces include one 110v/20amp circuit. See accompanying Price Chart for prices.

**FRONTAGE** \_\_\_\_\_ **feet**    **DEPTH** \_\_\_\_\_ **feet**                      **PRICE \$** \_\_\_\_\_

**MAIN STREET FRONTAGE** is a premium @ \$10 per front foot.                      **PRICE \$** \_\_\_\_\_

**TENTS:** We have tents available to rent, if requested. All tents are equipped with lights and sides. A list of available tents for rent are noted in the Tent Price Chart. A Porta floor is available for an additional price of \$1.75 per square foot.

Tent size: \_\_\_\_\_ without sides PRICE: \$ \_\_\_\_\_

Tent size: \_\_\_\_\_ with sides PRICE: \$ \_\_\_\_\_

Porta floor (Y or N) \_\_\_\_\_ PRICE: \$ \_\_\_\_\_

Special requests for tent(s) \_\_\_\_\_

*ADDITIONAL ELECTRICAL CIRCUITS are priced at \$100 each. PRICE \$ \_\_\_\_\_*

**STATE OF NEW JERSEY FIRE SAFETY PERMIT FEE: (Payable to Frankford Township)**  
*\*\*\*If your tent is **Greater than 900 sq. ft** in area **AND more than 30 ft** in any direction an additional permit application and fee is required for the tent.*

**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 Association as an Additional Insured. See page 8 of Vendor Handbook.

\_\_\_\_\_ I would like to purchase insurance from the fair for \$165.00 PRICE \$ \_\_\_\_\_

\_\_\_\_\_ I will provide liability insurance naming the SCF&HS Association as an "Additional Insured" by June 1, 2023.

**NJ Sales Tax:**

A NJ State Sales Registration number is required of all vendors. Please see page 11 of the handbook.

\_\_\_\_\_ I acknowledge having a Tax ID number and will make sure it is posted.

\_\_\_\_\_ I do not have a Tax ID number.

**CAMP SITE:** \$50/night Number of nights \_\_\_\_\_ PRICE \$ \_\_\_\_\_  
\$75/night Number of nights \_\_\_\_\_

**NEW VENDOR DEPOSIT (if applicable)**

**PERFORMANCE BOND FEE: All NEW EXHIBITORS** must enclose a separate \$200.00 check, and a self-addressed envelope with their contract. The same check will be mailed back to you after the fair, providing you have manned your booth during all fair hours, your spaces are left in a clean, acceptable condition, and you have complied with all rules and regulations found in the Vendor Handbook.

**PRICE: \$\_\_\_\_\_**

**TOTAL OWED: \$\_\_\_\_\_**

**FINANCIAL INFORMATION:**

**CREDIT CARD:**

**Please scan the QR Code with your phone or follow the link below to complete your payment information! *There is a 3.5% processing fee for this option.***



<https://secure.transaxgateway.com/HostedPaymentForm/HostedPaymentPage.aspx?hash=%2FnRECCdprQCla0N0WxaMg%3D%3D4lepjYnlCpev8rJ4uimcmw%3D%3D>

**Pay by Check: made out to The New Jersey State Fair**  
**Pay with PayPal**

*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.*

*\* The New Jersey State Fair, reserves the right to make any necessary changes for the safety of all involved.*

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Vendor

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Concessions Manager

**Please return contract to: New Jersey State Fair  
Attention: Concessions Manager  
PO Box 2456  
Branchville, NJ 07826**

**Email to: [dpost@njstatefair.org](mailto:dpost@njstatefair.org)**

**or Fax to: 973-948-0147**