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c/o Port Dover Board of Trade
19 Market Street West, Box 239, Port Dover, Ontario N0A 1N0 •
Email: info@portdover.ca Phone / 519-583-1314 Fax /519-583-3275

Mobile Food VENDOR APPLICATION for Friday, September 13th, 2019

IMPORTANT INFORMATION

Absolutely No Un-Licensed Event Merchandise Sales Allowed without prior signed permission ie: PD-13, the above logo or Friday the 13th/ Port Dover. For trade mark license agreements, contact 519-583-1314.

- Vendor License Applications for food only will be issued through Norfolk County.
Please direct your Vendor License Application through the clerk's office attention Marie.Cook-Potter@norfolkcounty.ca
Vendor to provide proof of liability insurance in an amount of no less than \$2 million with the vendor application.
Vendor must keep a safe, clean site. Failure to comply to the above could result in being asked to leave and limit future participation.
Port Dover Board of Trade is the site coordinator. We will allot space as applications are received -- without any guarantees.
Hydro and Water are not supplied. Generators are for food trucks only but will be inspected.
You must clean up your site prior to departure. A dumpster will be on site. Please use it.
Departure not permitted prior to 9:00 pm. on the day of the event. The site must be vacant by 6:00 am Saturday September 14th.

Sales permitted starting at 6:00 pm September 12th

There is only so much room available. Secure what you need. Payment is due immediately. Space not paid will be reassigned. Please make Bank Draft, Cheque, Master Card or Visa payable to Port Dover Board of Trade
Send or deliver payment to: Port Dover Board of Trade, 19 Market St. West, PO Box 239, Port Dover, Ontario N0A 1N0
If delivering payment by hand to 19 Market St. West, please call ahead to 519-583-1314 to ensure office is open.

Rain or Shine – No Refunds

(Licenses will not be issued after 4 pm August 30, 2019). You will not be permitted to participate without it.

Read carefully, complete form, mail along with:

- Payment of Fee - please have company name on draft or money order
Photocopy and attach proof of minimum \$2,000,000 liability insurance with the Corporation of Norfolk County and Port Dover Board of Trade listed as additional insured.

Business Name: _____ vehicle description _____
Contact Name: _____
Mailing Address: _____
Phone: _____ Fax: _____ Email: _____
Exact items to be sold (In Detail): _____

Number of 10 ft. x 10 ft. spaces required _____ @ \$500 per 10 ft. space (plus HST) = \$ _____

As the coordinator, Port Dover Board of Trade will be assigning spots on a first-come basis.

Circle Payment type: Cash Cheque Bank Draft Visa Master Card

Card # _____ Expiry _____

By my signature (vendor), I indicate that I have read the above information carefully and agree to it.

Signature _____ Date: _____