

# Fox Valley Park District

## Stuart Sports Complex

### Registered Vendor Application



Those wishing to use contracted services such as tents, portable restrooms, moon jumps or a DJ service at their event may do so by using a registered vendor. Those wishing to add additional services to their tournament must notify the Park District at the Cole Center Administration Office, or call 630-897-0516.

Those adding additional services coordinate directly with the vendor in regards to scheduling and payment of services. Food vendors, tents, moon jumps, portable restrooms or other contracted services may be used. Vendors providing services on park district property must be registered and on our Stuart Sports Complex Registered Vendor List. To become registered a valid certificate of insurance for the year must be submitted. Each event a vendor attends; a \$100 vendor fee will be charged and must be paid prior to the event.

Any request requiring FVPD approvals, services, assistance and/or other support for a special event must provide the following information. Submittal of application does not constitute approval.

#### Contact Information

INDIVIDUAL OR BUSINESS NAME \_\_\_\_\_

PRIMARY CONTACT \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

CELL PHONE NUMBER \_\_\_\_\_ HOME NUMBER \_\_\_\_\_

BUSINESS NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

WEBSITE ADDRESS \_\_\_\_\_

DATE REQUESTED \_\_\_\_\_

#### Insurance

INSURANCE COMPANY NAME \_\_\_\_\_

POLICY NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

#### County Health Department Food Establishment / Handling Permit

Kane LICENSE NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

**FORM CONTINUED ON SECOND PAGE ►**

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#### Types of Services Provided

Tent Vendor

Size Of Tent(s) Providing: \_\_\_\_\_ How Will They Be Secured To The Ground?: \_\_\_\_\_

Concessions

You must provide a menu with pricing, as well as a description of sales set up (food truck, tent, etc.).  Truck  Tent

Inflatables/Moon Jump

Golf Carts

Quantity: \_\_\_\_\_ Delivery Date/Time: \_\_\_\_\_ Pick-Up Date/Time: \_\_\_\_\_

Portable Toilets/Hand Wash Station (must be rented through Fox Valley Park District vendor)

Quantity: \_\_\_\_\_ Delivery Date/Time: \_\_\_\_\_ Pick-Up Date/Time: \_\_\_\_\_ Service Dates/Times: \_\_\_\_\_

Athletic Equipment

Description: \_\_\_\_\_

Band/DJ/Amplified Sound

Description \_\_\_\_\_

Performer/Entertainer

Description: \_\_\_\_\_

#### Permit Fee

Registered Vendor Fee:  \$100 per event for concession/food vendors

\$50 per event for non-food vendors

#### Acknowledgement of Application Policy

Permitee agrees to follow and adhere to the rules and regulations of the Fox Valley Park District, as well as applicable local, county, state and federal laws. Vendor will be required to have the appropriate health licenses and insurance coverage. Please attach certificate of insurance (minimum \$1,000,000 general liability) with your applications. All certificates of insurance need to name the Fox Valley Park District as additional insured. If required, also attach a copy of appropriate health department licenses / permits.

Vendors who excavate or drive equipment into the ground, by Illinois law you must call the Illinois One-Call System at least 48 hours in advance before you start working.

The system will then notify ComEd and other utilities of your project and give each an opportunity to locate their facilities for you. You must call 811 before you began any digging project. If you don't call and you hit an underground line, you could be hurt or killed. You may be held liable for damages. Please read the attached ComEd 811 document. For more information visit [www.call811.com](http://www.call811.com).

Fox Valley Park District reserves the right to terminate this permit if: 1) applicant misrepresents, falsifies, or withholds information, 2) requirements, restrictions, terms and conditions or rules pertaining to this permit or any Fox Valley Park District ordinances are violated. Fox Valley Park District shall not be liable at any time or loss, damages or injury to person or property. Applicant and/or organization agree to hold harmless the Fox Valley Park District, its Trustees, Officers, Agents, Volunteers, Attorneys and Employees from any and all losses, claims expenses, costs and damages.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Attachments: certificates of insurance, health department licenses (if applicable)