

### HOOLEY ON THE HUDSON XXIII™ SUNDAY—September 1, 2024-- NOON UNTIL NINE VENDOR APPLICATION—<u>CRAFT VENDORS</u>

Applicant Nam	<b>1e:</b> _ (required)				
<b>Business Name</b>	(required)				
<b>Email Address</b>	: _ (required)				
Phones: (required	l) <b>(W)-</b>	(H)	(Ce	ell)	(Fax)
Auto Lic. Plate	#_(required)		Make(req	uired)	
Model					
*NYS Vendor	Lic. Or Tax N	umber: (re	quired)		
transfers. In consideration administrators, waive and i and any Department, the C in this event. Signature	of accepting this vendor a release any and all rights "ity of Kingston, and any a	application, I the unders and claims for damages and all sponsors, and th	signed, intending to be lease s I may have against the a leir representatives, succe	gally bound fo Ancient Order essors and assi	<b>RED</b> ***No refunds, exchanges, or or myself, my heirs, executors and of Hibernians, the City of Kingston Parks igns for any and all injuries suffered by me
	# of Booths_X	<u> \$200.00 =</u>	+ <b>\$50.00</b> =	Ť	
<u>This char</u>					Vendor Permit Fee
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		•	U U		ermit (see page 3)
			0		inty Ancient Order of
	Hibernians and	•	<u> </u>	-	
It you have any que	estions, please call	1 (845) 338 6622	. Spaces are only	sold in fu	ll 10' x 10' areas. You should

If you have any questions, please call (845) 338 6622. Spaces are only sold in full 10' x 10' areas. You should calculate your required space and buy the required number of spaces you need and then add the City Vendor Fee. No refund of any monies for space registration will be made after July 6, 2024 This is an Irish Event. Your booth must have respectful Irish items.

Application Received: Space Required: Space Assigned: For Festival Use Only



#### NOTES

#### \* NYS Vendor License or Tax Number and Insurance certificates must be submitted at time of application. \*

\*\* The Hooley on the Hudson<sup>TM</sup> Committee reserves the right of removal of any items for sale that are deemed offensive or inappropriate. \*\*

\*\*\* Vendor spaces are limited and will be assigned on a first come, first served' basis. \*\*\*

# \*\*\*\* The Area for Vendors does not allow for tents that have stakes or devices that would cause a hole to be placed in the site. \*\*\*\*No tent stakes will be allowed. \*\*\*\*

To be GUARANTEED space, <u>ALL</u> applications and payments must be received by <u>July 6, 2024</u> No applications will be accepted after this date.

All Checks/Money Orders are to be made payable to **ULSTER COUNTY ANCIENT ORDER OF HIBERNIANS** 

(Memo: Hooley<sup>™</sup>) and send to PO BOX 2026, Kingston, NY 12402 **Vendors** 

A certificate of insurance naming the Ancient Order of Hibernians and the City of Kingston as also insured must accompany all vendor applications. Food vendors must meet the requirements of a temporary food service establishment as governed by the Ulster County Health Department, Division of Environmental Sanitation. The Health Department can be reached at (845) 340 3036.

<u>\*\*\*\*The City of Kingston Vendor Permit(s) must be on file 4 weeks prior the Date of the Event with the City</u> of Kingston, NY \*\*\*\*

\*\*\*\*The Temporary Food Service Form(s) must be on file 4 weeks prior of the Date of the Event with the UC Health Department\*\*\*\*

#### Vendor Check-in

Access to the Festival site begins at 7:00AM. No access to the site after 10:00 AM will be allowed. If vendors haven't been notified of their locations prior to this, vendors will be given their location at this time. Vendors are responsible for providing their own supplies, including tables, chairs, electrical cords, extension cords, hoses, booth materials, etc. Electricity is available on site. <u>Maximum electric is 20 AMPS</u>. You must bring at least 100 feet of power cord to access electricity. Please notify us if you have special electrical needs or other requirements.

#### THERE IS NO PARKING IN THE IMMEDIATE FESTIVAL AREA. THERE IS NO WATER HOOK UP AVAILABLE

<u>Food vendors that use oil for cooking MUST REMOVE and take with you the used oil when you leave.</u> The Hooley<sup>TM</sup> officially begins promptly at 11:30AM with the opening ceremonies and will continue until 9:00 PM. Booths are not allowed to be taken down until 9:00 PM

Hooley<sup>™</sup> events will be photographed (both video and still) to develop promotional materials for future festivals. Vendor participation implies permission to use any images captured for festival purposes. Thank you for your support.

Page 2 of 4



## **City of Kingston Event Vendor Application**

	Name of Vendor:									
1.	If applicant is employed list name and address of employer. Also list credentials establishing relationship									
2.	Applicant's drivers license # as issued by NYS Department of Motor Vehicle									
3.	If applicant proposes to operate a	If applicant proposes to operate a vehicle in connection with vending please describe applicable below :								
	Cart License # or other identification									
	Vehicle		_ License # or other i	dentification						
	Other		License # or other i	dentification						
4.	Description of goods, wares and m distribution.			e applicant desires to perform and method of						
5.	If the applicant is a corporation or association, the name address and title of the officer upon whom process or other legal notice may be served:									
	•									
6.										
7.			-	Iealth Department to serve or sell food						
8.	No Alcohol may be served or sold		0 0							
9.	A certificate of liability insurance in the amount of \$1,000,000 (one million) listing the City of Kingston as an									
	additional insured must accompa									
	HOLD HARMLESS AGREEME	ENT (PURSUANT	TO SECTION 61-5(F) O	OF THE CITY OF KINGSTON CODE						
"Veno and a count judge	ssigns agrees to hold harmless and in ts, reckonings, bonds, bills, specialties	after referred to as t demnify the "City" f s, covenants, contrac	he "City" that the "Vendor rom all actions cause of ac ts, controversies, agreeme	, hereinafter referred to as " or heirs, executors, administrators, successon tions, suits, debts, dues, sums of money, ac- ents, promises, variances, trespasses, damages uity arising out of the "Vendor's" business with						
Vend	or Applicant (print name)									
Vend	or Applicant Signature									
	Dated:	day of	month,	year						
vario				Kingston and other groups, sponsor events in operation during these events if said operation						
Vend	or Applicant (print name)									
Vond	or Applicant Signature									

ACORD	

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)
Date Certificate Created

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.													
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).													
				Certi		CONTAC		3).					
						NAME: PHONE				FAX			
		ABC Insurance Agency				(A/C, No E-MAIL ADDRES	, Ext):			(A/C, No):			
		123 Main Street				ADDRES				-			
		Anytown, US 11111					INSURER(S) AFFORDING COVERAGE INSURER A : XYZ Insurance Company				NAIC # Carrier Code		
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T	he A	Ancient Order of Hibernians Fr.	Con	Coll	oert Woulfe Div. 1 Ulst	er Cou	nty, and th	ne City of Kir	ngston, are n	<mark>amed as Ad</mark>	ditio	nal Insured,	
		ith respect to the named insured											
*w	ordi	ing can be per carrier/agent guid	eline	s, but	t must name both AOH	and Ci	tv of Kino	ston as Addit	ional Insure	ds, and refer	ence e	event.	
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CERTIFICATE HOLDER CANCELLATION													
Ancient Order of Hibernians SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN													
Fr. Con Colbert Woulfe Div. I Ulster County							VITH THE POLIC						
PO Box 2026													
Kingston, NY 12402							IZED REPRES	ENTATIVE					
						Sign	nture of Age	ncy or Company	Representative	•			
Signature of Agency or Company Representative													
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