

Brighton's Smokin Jazz and Barbeque Blues Festival Contracted Food Vendor Application

Friday, September 6th from 5:00PM to 10:00PM Saturday, September 7th from 12:00noon to 10:00PM Rain or Shine!

APPLICATION AND PAYMENT DEADLINE: JULY 1, 2024

Applications will be frequently reviewed and accepted. Limited spaces are available, and only completed applications will be accepted. Get your app in early!

One application per booth request please.

There are new requirements of the Brighton Fire Department and the city of Brighton have changed.

The city requires the following:

Vendors shall provide ground surface protection to capture spillage and effluent in and around the mobile food preparation vehicle where preparation or serving of food takes place. This may include the use of rubber stall mats, roofing paper, or contractor grade floor protection paper. Protection shall be secured to ground surface utilizing gaffers' tape (ONLY), to prevent trip hazard. Duct or similar tapes shall not be used. Surface protection shall be maintained and clean throughout the duration of the event to prevent and to limit potential damage or staining of concrete.

The Brighton Area Fire Department will require an application to be filled out once you are approved to be in the event.

Business Name:
Michigan Sales Tax #:
Contact Person (First & Last Name):
Contact Person Best Phone Number:
Contact Person On-Site Phone Number (if different):
Street Address:
City, State & Zip Code:
Email Address:

FUOD VENDUR SPACE UPTIONS (please choose one):
\Box 12'x20' space = \$350
\square 12'x30' booth space = \$500
\square Please add an additional 15ft of booth space = \$300
BOOTH DETAILS (Size of concession):
Frontage (serving side):feet Depth: feet
Are you: Food Truck (vehicle which you will drive in and cook/serve out of that is not pulled by another vehicle) Food Trailer (pulled by a vehicle that will be removed from the street) Tent Booth Please see below for Fire Code.
Brighton Fire Code Mobile food preparation and operations equipped with fuel-fired, solid-fueled, or electric appliances that produce smoke or grease-laden vapors shall be conducted within an enclosed approved mobile food preparation vehicle (truck or trailer). Cooking equipment that produces grease-laden vapors shall be provided with a Type-1 kitchen exhaust hood protected by an automatic wet chemical fire extinguishing system. Exception: This does not apply to enclosed solid-fueled pizza ovens, solid-fueled grills, or solid-fueled smokers when provided an enclosed firebox and a lidded cooking surface.
All cooking operations not producing grease-laden vapors or smoke, but producing only steam are permitted to be located outside a mobile food preparation vehicle but shall be located beneath a protective canopy such as a fire-resistant tent, umbrella, or roof. Examples would be steam tables, boilers, rice makers, etc.
All mobile food preparation vehicles and operations are subject to inspection by the Brighton Area Fire Authority and Livingston County Health Department. The fire inspection shall take place at least one week prior to an event and the health inspection the day of (typically) the event. Once both inspections have been approved, operations will be permitted to commence. If either inspection fails, the vehicle shall vacate the premise until both inspections are successful.
For food trucks/trailers - Do you serve out of the driver or passenger side of your vehicle (please circle): DRIVER SIDE PASSENGER SIDE
Are you planning to bring a smoker (please circle): YES NO
POWER REQUIREMENTS: Please note, per the Brighton Area Fire Department, <mark>generators are not allowed</mark> .
One (1) 110v electrical outlet is allocated to each food vendor. Yes, I will need my allocated 110v electrical outlet No, I will not need my allocated 110v outlet
Please note additional electrical requirements below (extra charges will apply):
Additional 110v outlets required: # @ \$25 each = \$

220V/**30** Amp* hookups required: # @ \$35 each = \$

220V/**50** Amp* hookups are very limited. If you require a 50 Amp, indicate here **\bigcup** Cost is \$50

*The 220/30 Amp and 220/50 Amp connections look like the below images. If your connection is different, you will need a converter.











220/50 Amp Outlet. Requires this connection.

Electrical requirements will determine final location. Only those outlets noted on original application will be available for your use during the event. In order to be fair to all vendors, no exceptions and no special accommodations will be made at time of set up. All vendors must supply their own power cords and a minimum of 200 ft.

HEALTH DEPARTMENT LICENSING:

Are you currently licensed to operate? 🔲 Yes 🔲 No	
If yes, what type of license do you have?	
☐ Special Transitory Food Unit (STFU) ☐ Temporary Food Establishment (TFE)	
■ Mobile Food Truck ■ MDARD (State License) ■ Fixed (location, store front)	☐ Cottage Food

A copy of your license is required in order to complete your application. All vendors must file all necessary paperwork with the Livingston County Department of Public Health within seven (7) business days of application or your spot will be forfeited.

Not sure if you are licensed properly? Please contact the **Livingston County Health Department at 517.546.9850** for more information.

HOW DO I GET LICENSED?

- Food service license applications are available at the Livingston County Health Department website: www.lchd.org under Food Protection
- Temporary Food Service info and application available:
- https://www.livgov.com/health/eh/Pages/temporary-food-establishment.aspx
- Temporary Food License Fees: There are fees for each booth or location.
 https://www.livgov.com/health/eh/Pages/food-service-fees-2015.aspx
- Credit card authorization form:
- https://www.livgov.com/health/eh/Documents/Permits/EH-Credit-Card-Authorization.pdf

All vendors MI 48116) your liabili	ve liability insurance?
SPECIAL N	IOTES AND REQUESTS:
<u>PAYMENT</u>	REMITTANCE: Three payment options are presented below. Please choose one.
Chamber	should be made out to the Greater Brighton Area Chamber of Commerce and sent to the with Attn: Linda Carey at 218 E. Grand River Ave. Brighton, MI 48116. Applications and g documents with credit card info may also be sent to LINDAC@brightoncoc.org. Enclosed are two checks - one for Application Fee (\$25) and a second for Booth Fee(s) for booth(s). Checks should be made payable to the Greater Brighton Area Chamber of Commerce.
Option 2:	☐ Please charge \$25 Application Fee and \$ Booth Fee(s) for # of booth(s) to my credit card. My card information is below.
FOR CRED	OIT CARD PAYMENTS:
	□ VISA □ MasterCard □ Discover □ AMEX
	Card # EXP Date: Verification Code:
	Signature:
	Is address associated with your card the same as the one entered on page 1 of this document? Yes No If no, please list billing address here:

LIABILITY INSURANCE:

APPLICATION CHECKLIST: Payment and all documentation is due with application unless otherwise noted. Please ensure all relevant boxes have been checked before submitting your application/documents/payment. \[\begin{align*} \text{A COMPLETE menu is attached} \] \[\begin{align*} \text{Current photo(s) of booth/truck/trailer set-up is enclosed. Front, side and rear images are requested \] \[\begin{align*} \text{If you are a STFU - A copy of your Livingston County Health Department license. Please initial here ______ to indicate that you filed a Notice of Intent. Date filed ______. \] \[\begin{align*} \text{All others - It is your responsibility to notify the Livingston County Health Department to let} \]

them know that you are planning to participate in this event. This must be done within seven (7) business days of your application or your spot will be forfeited. A copy of your license is required

□APPLICATION FEE (\$25) is included.

■BOOTH FEE is included. Booth fees will be processed at time of acceptance. All payments returned due to insufficient funds will result in forfeiture of your space until all payments and associated fees have been received.

no later than JUNE 1st in order to complete your application. Date contacted ______.

☐ A valid and current certificate of insurance naming the Greater Brighton Area Chamber of Commerce (218 E. Grand River Ave. Brighton, MI 48116) and the City of Brighton (200 N. First Street Brighton, MI 48116) as additional insured (certificate holder) is attached. If not attached, I will submit my certificate no later than June 30.

I have read, understand and agree to the terms of the Contracted Food Vendor Information Sheet and Application.

Agreed to by (printed name): ______ Date: _____

Signature:

Please complete <u>entire</u> application and submit payment (checks should be made payable to the Greater Brighton Area Chamber of Commerce) along with required documents to:

Greater Brighton Area Chamber of Commerce ATTN: Linda Carey 218 E. Grand River Ave

Brighton MI 48116

APPLICATION DEADLINE July 1, 2024