

# NEVADA COUNTY FAIR VENDOR APPLICATION

Dear Exhibitor:

The dates for the 2008 Nevada County Fair will be August 6 -- 10. If you are interested in being a part of our fair, please fill out and return the following application to the Nevada County Fair. **PLEASE DO NOT SEND MONEY WITH THIS APPLICATION.** This form must be completed before a contract will be issued. Please include a picture of your booth with your application.

Each prospective exhibitor, including returning vendors must submit an application. Last year's exhibitors are given first opportunity (until March 30) to reserve space for this year's fair. New exhibitors will have their applications held until after March 30 before a contract is sent.

## SPACE FEES

### INSIDE RATES

Nevada County Business & Residents:

9'8" w x 10' d (Display Only) \$520.

9'8" w x 10' d (Sales Only) \$420 + \$100 or  
20% of gross sales whichever is greater

### **Out of County**

9'8" w x 10' d (Display Only) \$625

9'8" w x 10' d (Sales Only) \$525. + \$100. or  
20% of gross sales whichever is greater.

### OUTSIDE RATES

Nevada County Business & Residents:

10' w x 10' d (Display Only) \$470.

10' w x 10' d (Sales Only) \$370. + \$100 or  
15% of gross sales whichever is greater

### **Out of County**

10' w x 10' d (Display Only) \$575.

10' w x 10' d (Sales Only) \$475. + \$100 or  
20% of gross sales whichever is greater.

**\*\*When a product or service is sold or deposit for orders are taken at exhibit space, add \$75 to INSIDE commercial space rate and \$125 to OUTSIDE commercial space rate.\*\***

A CERTIFICATE OF INSURANCE IS REQUIRED in the amount of \$1,000,000.00, if you receive a contract. Please see that your insurance company has a copy of the information required on the certificate.

The Certificate or insurance policy shall set forth:

- 1. That the State of California, the 17<sup>th</sup> District Agricultural Association, County Fair, the County in which the County Fair is located, Lessor/Sublessor if fair site is leased/subleased, Citrus Fruit Fair, or California Exposition and State Fair, their directors, officers, agents, servants and employees are made additional insured, but only insofar as the operation under this contract are concerned.  
(The wording must remain the same.)**
2. The dates of inception and expiration of the insurance.
3. The amount of public liability coverage of not less than \$1,000,000.00.
4. A statement by the insurance company that it will not cancel or reduce the limits or coverage of said policy or policies without giving 30 days prior written notice to the named insured for Fairtime use.

If you will be selling items you must have a current sales ID number from the **California State Board of Equalization. The number is 916-227-6702. Please no dogs**

DIRECT INQUIRIES TO:

Nevada County Fair  
P. O. Box 2687  
Grass Valley, Ca. 95945  
(530) 273-6217 ~ Fax (530) 273-1146

**NEVADA COUNTY FAIR  
VENDOR APPLICATION**

**AUGUST 6 – 10, 2008**

**Circle: Inside or Outside**

Business Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Booth: \_\_\_\_\_ Display Only \_\_\_\_\_ Sales & Display

Space Size Requested: \_\_\_\_\_

Electrical Requirements: \_\_\_\_\_

Do you sell or take orders for merchandise or services? Yes \_\_\_\_\_ No \_\_\_\_\_

Contact the Nevada County Health Department if giving out food samples..... 530-265-1530

What products do you plan to display or sell? (be specific): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

State Board of Equalization Permit No: \_\_\_\_\_

**I HAVE MY OWN INSURANCE** \_\_\_\_\_ **I WILL PURCHASE INSURANCE** \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

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Mail Application and Photo to:  
Nevada County Fair  
P. O. Box 2687  
Grass Valley, Ca. 95945

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For Office Use Only

Location \_\_\_\_\_ Space# \_\_\_\_\_ Fees \_\_\_\_\_ Contract Number \_\_\_\_\_