



# 2019 WILLIAMSON COUNTY FAIR VENDOR/EXHIBITOR APPLICATION

Franklin, Tennessee • [www.WilliamsonCountyFair.org](http://www.WilliamsonCountyFair.org)

**AUGUST 2<sup>nd</sup> - AUGUST 10<sup>th</sup>**

Applicants Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_  
(as it should be shown on the WCF website)

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

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

Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Web-site Address: \_\_\_\_\_  
(needed for hyperlink on WCF website)

**Type of Exhibit: (Check all that apply)**

- Promotional Exhibit: ( ) Space used for the purpose of advertising, promoting, and/or educating.
- Retail Exhibit: ( ) Space used for the purpose of displaying or selling merchandise.
- Outside Concessionaire Exhibit: ( ) Space used for the purpose of selling food and beverages.
- Inside Concessionaire Exhibit: ( ) Space used for the purpose of selling food and beverages. (non-cooking only)

Do you need direct water hook up?  
Yes No

Do you need a 6' table & cloth?  
Yes No (Inside booths only)

Do you need (2) chairs?  
Yes No (Inside booths only)

BOOTH RATES	
Outside Concessionaire Booth -	\$1,000 per 15' x 10' space
Inside Exhibit Booth (non-food) -	\$750 per 10' x 10' space
Inside Concessionaire Booth (non-cooking) -	\$750 per 10' x 10' space

BOOTH HOURS INSIDE	
Mon-Fri	6 pm – 10 pm
Saturday	10 am – 10 pm
Sunday	Noon – 10 pm
BOOTH HOURS OUTSIDE	
Mon – Thurs	6 pm – 11 pm
Friday	6 pm – Midnight
Saturday	10 am – Midnight
Sunday	Noon – 11 pm

- Enclosed is my check for 75% of the total cost. (A minimum of 75% is due in order to reserve booth spot. The full 100% is required by July 1, 2018. Fees received after July 1<sup>st</sup> MUST BE Cash or Money Order. Credit Cards are NOT accepted.) If final payment is not received by 7/1, your spot may be forfeited and given to another company on our wait list.
- Enclosed is total amount owed.
- Yes, I would like to be included on the Fair's Insurance policy. (\$200.00)

**CHECKS and MONEY ORDERS PAYABLE TO: Williamson County Fair Association, Inc.**

**\*\*PLEASE NOTE: A 75% deposit is required with ALL applications. This is an application for space. THIS APPLICATION DOES NOT GUARANTEE SPACE. You will be contacted by the Vendor Manager to confirm. If space is not assigned, the deposit will be returned. If confirmed, a Vendor Information Kit with additional pertinent information will be sent to you in June.**

**This space for use by WCF Management only**

Booth Space # \_\_\_\_\_ Total \$ \_\_\_\_\_ Comments: \_\_\_\_\_

Deposit \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_

Final Payment \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_

List ALL products and/or services that will be sold/displayed, including pricing of ALL items, or attach a brochure showing same. NO menu changes may be made without prior approval of Vendor Manager. YOU MAY BE ASKED TO REMOVE CERTAIN ITEMS IN ORDER TO KEEP MENUS VARIED.

PRODUCT	PRICE	PRODUCT	PRICE

Please Note: You will be processed on the basis of this application. Once confirmation of acceptance is issued, you may not substitute or add items without approval. Violations may result in cancellation of contracts and forfeiture of monies paid. The Williamson County Fair reserves the right to offer space based on product, space availability, size of space required, maintaining a balanced program of products throughout the fairgrounds, and attractiveness of the exhibit.

**\*MUST BE COMPLETED\***

Do you need electricity? Yes    No    \*(1) Standard 20 amp, 110V duplex NON-DEDICATED outlet provided.

\*Please note: An additional 110v outlet may be provided based on availability. You must provide 100 ft. of cord and a backflow preventer.

How many plugs are needed? \_\_\_\_\_      Outside only: if 220V is needed, how many amps \_\_\_\_\_  
(This will affect your location. 20 amps is maximum offered.)

**IMPORTANT:** If using 220v, you must include a photo of your plug and connectors so that we can ensure your plug will easily attach to our electricity.

- All 120-volt electrical wires shall be a minimum of 12 gauge in size and 100 feet in length.
- All 220-volt electrical wires shall be a minimum of 100 feet in length and of the proper size for the amperage required.

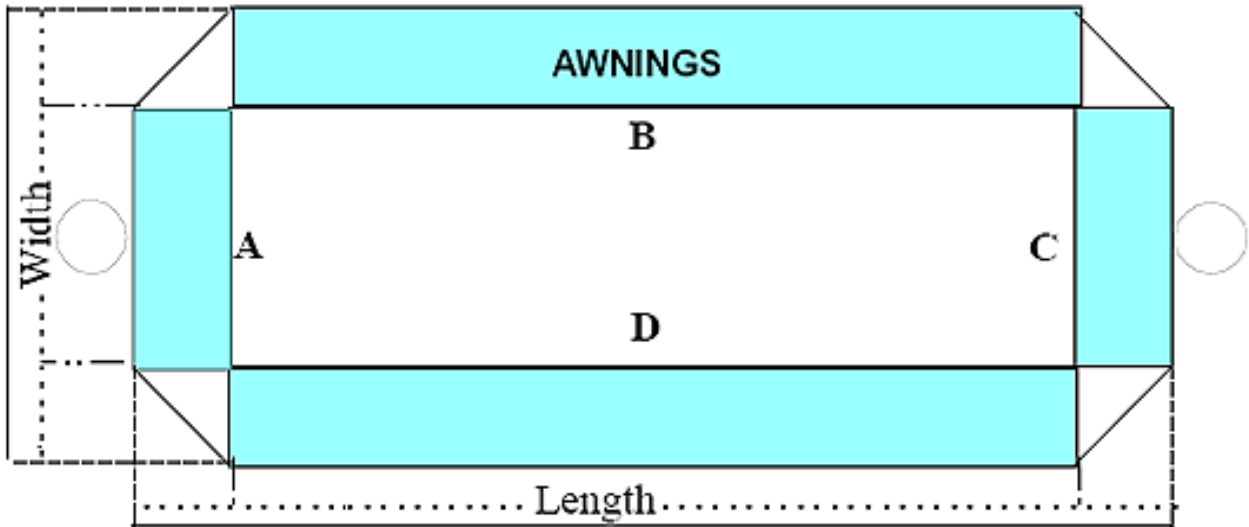
**\*PLEASE BE ACCURATE AND SPECIFIC\***

List ALL electrical equipment you will be operating, including amperage used for each piece of equipment. Coverage is NOT guaranteed if ALL items are not listed.

ITEM	AMPS	ITEM	AMPS

**ALL OUTDOOR CONCESSIONAIRES MUST COMPLETE THIS SECTION.** In order to better accommodate your needs, please clearly indicate below what your booth/trailer/exhibit looks like, including all pertinent measurements. This is very important for proper placement at the fair. **You MUST include all width, height, and length needs including ALL tongues, doors, awnings, etc.**

All spots are 15' long x 10' deep, and run end to end with NO space between. If you need longer than 15', you must rent two spaces.



**Based on this diagram, complete this information. BE DETAILED!**

Trailer/Tent size **NOT** including awnings = length \_\_\_\_\_ x width \_\_\_\_\_

Trailer/Tent size **INCLUDING** awnings, tongue and any space needed to open any door at end of trailer = length \_\_\_\_\_ x width \_\_\_\_\_

Service Side(s): A B C D

Is Tongue Removable? Yes No

Trailer Tongue Location: A C

Please provide any additional information that you feel is important to this application:

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**IMPORTANT:** Please attach recent photographs of your booth/trailer. Appearances, signs, and overall presentation will be juried this year.

Failure to represent the Williamson County Fair in the best way possible may result in your company not being invited back.

**INSURANCE REQUIREMENTS**

Insurance is required for ALL vendors/exhibitors in the amounts listed below.

**A CERTIFICATE OF INSURANCE MUST BE SENT IN AT TIME OF APPLICATION TO AVOID DELAYS IN APPROVAL AND SET-UP.** Certificate should show EXACT WORDING as follows:

**ADDITIONAL INSURED:**

*(Clearly listed as both)*

Williamson County, TN  
1320 West Main Street  
Franklin, TN 37064

**The minimums are:**

Each occurrence      \$1 million  
Personal Injury      \$1 million  
Total aggregate      \$2 million

**And**

The Williamson County Fair Association, Inc.  
306 Public Square  
Franklin, TN 37064

**\*Refer to Page 5 for an example of a correct Certificate of Insurance\***

IF ACCEPTED, APPLICANT AGREES THAT THEY HAVE READ, UNDERSTAND AND AGREE TO THE "RULES AND REGULATIONS" OF THE WILLIAMSON COUNTY FAIR, WHICH ARE LOCATED AT [WWW.WILLIAMSONCOUNTYFAIR.ORG](http://WWW.WILLIAMSONCOUNTYFAIR.ORG) AND INCORPORATED HEREIN BY REFERENCE. APPLICANT AGREES THAT ALL INFORMATION SUBMITTED HEREIN IS TRUE AND CONSISTENT WITH THE WILLIAMSON COUNTY FAIR'S RULES AND REGULATIONS. ANY FALSIFYING OF INFORMATION ON THIS DOCUMENT MAY DISQUALIFY THE APPLICANT FROM FURTHER PARTICIPATION IN THE WILLIAMSON COUNTY FAIR. APPLICANT ACKNOWLEDGES THAT THEIR COMPANY NAME WILL BE PLACED ON THE WILLIAMSON COUNTY FAIR WEBSITE FOR MARKETING PURPOSES.

**Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**\*APPLICATION MUST BE SIGNED\***

**Please complete in full and return to:**

Williamson County Fair/Vendors  
P.O. Box 329  
Franklin, TN 37065

**Questions please contact:**

CHERYL BURNSIDE  
Phone: 615-584-7411  
E-mail: [sponsors\\_vendors@williamsoncountyfair.org](mailto:sponsors_vendors@williamsoncountyfair.org)

**CHECKLIST: DID YOU.....**

- complete the entire application including signature? Dated?
- review all "Rules and Regulations"?
- list all menu items or products to be sold with pricing, or attach a brochure showing same?
- contact your insurance agent, and attach your current (2019) certificate of insurance with Williamson County, TN and The Williamson County Fair Association, Inc. listed as Additional Insureds?**

**(THIS IS REQUIRED BEFORE SET-UP CAN BEGIN)**

- clearly complete electricity, if needed?
- include 75% deposit, and make a note to pay the balance due by 7/1/19?
- email or mail a photo of your plug if you have requested 220v electrical?



"EXAMPLE"

# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)

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).

PRODUCER	CONTACT NAME:		FAX (A/C, No):
	PHONE (A/C, No, Ext):		
E-MAIL ADDRESS:			
INSURED	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A:		
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES                      CERTIFICATE NUMBER:                      REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE	\$1,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE	\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE    OTHER	
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Insured/Holders shall include:

Williamson County, TN 1320 West Main Street Franklin, TN 37064	The Williamson County Fair Association, Inc. 306 Public Square Franklin, TN 37064
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## CERTIFICATE HOLDER

## CANCELLATION

	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

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ACORD 25 (2016/03)

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**EXAMPLE FORM - Shows exact wording required for Additional Insured/Certificate Holders**