

2012 GREATER HARTFORD FESTIVAL OF JAZZ
BUSHNELL PARK, HARTFORD CT.
JULY 20, 21, 22, 2012

ARTS AND CRAFTS VENDOR APPLICATION*

SETUP TIME ~ JULY 20, 2:00 SHARP, CITY INSPECTION 4:30 SHARP
SETUP TIME ~ JULY 21-22, 11:00 SHARP, CITY INSPECTION 12:00 SHARP

Please Print All Information.

Business Name: _____

Type Of Business: _____

Licensed Vendor: YES () NO () # _____

Sale/Display Items: _____

Your Name / Contact Name: _____

Address: _____

Phone: _____ FAX: _____

E-Mail: _____

The 2012 Greater Hartford Festival of Jazz Board Of Directors
reserve the right to be selective and limit the number of spaces.

The GHFJ will provide the following:

- A) (1) 10' x 10' Booth Size
- B) (1) 6' table and 2 chairs
- C) Electrical Outlet will be a 20-amp circuit (exactly what will be plugged into circuit)
- D) 2 Spaces can be purchased for \$625.00 (includes \$25.00 City of Hartford Fee)**
- E) The GHFJ will be enforcing the late fees in 2012 and will not accept checks after the due date, only money orders. "Plan early and get your money in on time"

***VENDORS WILL NOT BE ALLOWED TO ADD ON TO YOUR SPACE WITHOUT PAYING THE ADDITIONAL FEE. THIS WILL BE STRICTLY ENFORCED.**

BOOTH FEE FOR 3 DAYS: \$425
(includes \$25.00 City of Hartford Fee)

BOOTH SPACE WILL BE RESERVED UPON RECEIPT OF CHECK OR MONEY ORDER AND REGISTRATION FORM. DEADLINE JULY 9th, 2012. AN ADDITIONAL FEE OF **\$50** WILL BE IMPOSED FOR ALL FUNDS RECEIVED AFTER JULY 9th, 2012.

(ALL MONIES RECEIVED ARE NON-REFUNDABLE. NO CHECKS ACCEPTED AFTER JULY 9th, 2012.)

Please send application and check to:

The Greater Hartford Festival of Jazz
P.O.Box 230760
Hartford, CT 06123-0760

Vendor Submitted: _____

DATE: _____

Greater Hartford Festival Of Jazz Accepted: _____

DATE: _____

YOU MUST FILL OUT THE ITINERANT PEDDLER LICENSE APPLICATION BELOW AND SUBMIT WITH THE GHJF VENDING APPLICATION

For further information, contact Charles Christie (Site Manager) at 860-490-2199. Please visit our website at www.jazzhartford.org for further information about the 2012 GHFJ.



CITY OF HARTFORD
DEPARTMENT OF DEVELOPMENT SERVICES
DIVISION OF LICENSES AND INSPECTIONS
ITINERANT PEDDLER LICENSE APPLICATION



APPLICANT

Name	
Residential Address	
City ST ZIP Code	
Home Phone	
Business Phone	
Date of Birth	_____ Male / Female

VENDING FIRM

Owner	
Name of Business	
Business Location	
CT Sales Tax ID #	
Products vending	
If Food Vending: Health License #	
Annual/ Temporary	Dates of temporary events: _____
Are you self employed	Yes / No
Vehicle/ Pushcart	
Vehicle Make & Model and color	
License Plate #	

AGREEMENT AND SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am issued a license, any false statements, omissions, or other misrepresentations made by me on this application may result in the immediate revocation of my license. I further agree to abide by all Federal and State laws prohibiting the sale and use of illegal drugs and alcohol and I also understand that if I or any of my employees are arrested for sale or use of illegal drugs and alcohol that such arrest is grounds for immediate revocation of my license and notification to the State and Federal agencies.

Name (printed)	
Signature	
Date	