



**WEST ORANGE STREET FAIR**  
**June 2, 2018 - 11 a.m. to 5 p.m. ~ Rain or Shine**  
Set up: 9 - 10 a.m. Breakdown: 5 - 6 p.m.

**COMMUNITY ACTIVISTS, POLITICAL AND OTHER**  
**\$495.00 (10' x 10' space)**

**PLEASE PRINT**

Name: \_\_\_\_\_ Size space: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Day of event phone number: \_\_\_\_\_

Social Media Sites [Website/FB/Twitter/Instagram]: \_\_\_\_\_

**Vendor must supply own tent, tables, chairs and signage.**

New Jersey Sales Tax Number (if applicable): \_\_\_\_\_  
(Please enclose a copy of your sales tax certificate.)

**Enclosed is my check for \$ \_\_\_\_\_ or charge my  Visa  MasterCard  Amex**

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ Sec. Code \_\_\_\_\_

Signature \_\_\_\_\_

I agree to be **open during all hours** of the event. I will keep my area neat and clean during the event and will make sure it is clean when I leave. I understand that **all decisions made by Allen Consulting and/or the organizing committee are final, events are rain or shine, no refunds**, and that failure to abide by the above rules could terminate my relationship with Allen Consulting and any future involvement in events they organize. Checks returned for insufficient funds will pay an additional \$35 bank charge.

All Vendors are **REQUIRED** to submit the enclosed Vendor Hold Harmless/Insurance Agreement and a Certificate of Insurance (if business is covered) for all participating events.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail completed application and check or money order **payable to:**  
Allen Consulting, Inc.  
89 Middletown Road, Holmdel, NJ 07733  
Phone: 732-946-2711 Fax: 732-946-8032  
Email: sylvia@allenconsulting.com

# WEST ORANGE STREET FAIR

## Vendor Hold Harmless/Insurance Agreement 2018

The Vendor agrees to maintain in full force a policy of comprehensive general liability insurance under which the Downtown West Orange Alliance, Township of West Orange and Allen Consulting, Inc., are named as additional insured, and under which the insurer agrees to indemnify and hold Downtown West Orange Alliance, Township of West Orange and Allen Consulting, Inc harmless from and against all costs, expense, including reasonable attorney's fees, and/or liability arising out of or based upon any and all claims, accidents, injuries and damages arising out of the Vendor's negligent or improper acts in the operation at the above mentioned event.

The Vendor also agrees to indemnify and save harmless the Downtown West Orange Alliance, Township of West Orange and Allen Consulting, Inc. from and against all claims of whatever nature arising from, or claimed to have arisen from, any action, omission or negligence of the Vendor, or arising from any accident, injury or damage whatsoever caused to any person or property arising out of the Vendor's negligent or improper acts in the operation at the following listed events. The Vendor agrees to name the Downtown West Orange Alliance, Township of West Orange and Allen Consulting, Inc. as additional insured, and to provide a valid certificate of insurance with a liability limit of at least \$1,000,000 per occurrence.

This form becomes part of the Certificate of Insurance to which it is/will be attached.

\_\_\_\_\_  
*Print* Organization/Vendor Business Name:

\_\_\_\_\_  
*Event(s)*

\_\_\_\_\_  
*Event Date(s)*

\_\_\_\_\_  
*Print* Officer/Vendor Name

\_\_\_\_\_  
Officer/Vendor Signature

\_\_\_\_\_  
*Print* Witness Name

\_\_\_\_\_  
Witness Signature

Date of Agreement: \_\_\_\_\_

**CERTIFICATE HOLDERS MUST INCLUDE #1, 2 and 3 BELOW. ALL agencies may appear as additional insured on one certificate of insurance. You do not need separate certificates of insurance naming each agency as an additional insured. Mail to Allen Consulting, (see below)**

1. Downtown West Orange Alliance
2. Allen Consulting Inc., 89 Middletown Road, Holmdel, NJ 07733
3. Township of West Orange

Please Mail Insurance Certificate, Application, Payment  
& Hold Harmless/Insurance Agreement to:

**Allen Consulting, Inc. • 89 Middletown Road • Holmdel, NJ • 07733**  
Phone 732-946-2711 • Fax 732-946-8032 • Email [sylvia@allenconsulting.com](mailto:sylvia@allenconsulting.com)