



## 2024 Vendor Application

July 4, 2024 3:00 pm – 10:00 pm at El Dorado County Fair & Event Center

Submit applications to email: [amanda@eldoradocountyfair.org](mailto:amanda@eldoradocountyfair.org)

Mail/In Person: 100 Placerville Drive, Placerville, CA 95667 P. 530.621.5860

\$ 50 per 10' X 10' booth space

Company name \_\_\_\_\_

Contact \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Total dimensions of operation \_\_\_\_\_ Power needs (20 or 50 AMP) \_\_\_\_\_

Description of product sold \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Insurance:** Please choose one of the following options

**Provide own:** \_\_\_\_\_ **CFSA Master List #:** \_\_\_\_\_ **Purchase via fair:** \_\_\_\_\_ (current rate \$45 for General Liability)

A Certificate of Insurance for general liability is mandatory for all vendors and must be submitted directly from your agent to the Fair Office.

**All vendors will be required to provide \$1,000,000 public liability insurance naming the State of California, County of El Dorado, El Dorado County Fair and Event Center, their agents, servants, and employees as additionally insured.**

### Method of Payment:

Check # \_\_\_\_\_ Please make checks out to **EDCF or El Dorado County Fair**

Credit Card Visa \_\_\_\_\_ MC \_\_\_\_\_ (+ \$2.00 Processing Fee)

Credit Card # \_\_\_\_\_ CID # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

(Include city, state, and zip)

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_ Receipt # \_\_\_\_\_ Total Paid \_\_\_\_\_ Initials \_\_\_\_\_

Sellers Permit (BOE410D) \_\_\_\_\_ Insurance \_\_\_\_\_