

VENDOR CONTRACT AND APPLICATION

26th Annual Eagan Art Festival
June 27 & 28, 2020
Eagan Community Center Festival Grounds

Application must be completed in full and returned with payment or deposit by March 16. Final payment due in full on or before May 15.

Please type or print clearly.

BUSINESS NAME: _____

CONTACT NAME: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE NUMBER: _____
(Home) (Business) (Fax)

E-MAIL ADDRESS: _____

MINNESOTA SALES TAX ID NUMBER: _____

FEDERAL TAX ID NUMBER: _____

FEES:

Description	Price	Quantity	Total Amount
Space Fee - 10' x 10'	\$380.00	_____	\$ _____
Additional Space - 10' x 10'	\$380.00	_____	\$ _____
Electric Power Fee: (<i>You must provide a ground fault receptacle and extension cord</i>)			
20 amp	\$50.00	_____	\$ _____
50 amp	\$100.00	_____	\$ _____
20 amp (add'l)	\$50.00	_____	\$ _____
50 amp (add'l)	\$100.00	_____	\$ _____
Sanitation - Damage Deposit	\$50.00		\$ 50.00

I would like to support the Art Festival Scholarship Program with a donation: _____
(supports students going into the arts)

Total Due (checks payable to: Dakota Center for the Arts) \$ _____

I would like the option to utilize a quiet generator: Details: _____

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- I will be checking in _____ FRI or _____ SAT at _____ AM/PM (circle one)
All booths **MUST** be set up by 8:00AM on Saturday ready for inspection.
 - REQUIRED:** Proof of liability insurance including products liability coverage with **“the City of Eagan and the Dakota Center for the Arts and it’s assignees are listed as additional insureds”**:
 - _____ Has already been provided
 - _____ Is enclosed
 - _____ Will be provided by May 15

I _____ will _____ will not be towing a merchandise trailer. The length is _____ feet.

Trailer: Make _____ Color _____ License # _____

EQUIPMENT/PRODUCT LIST

<i>EQUIPMENT</i> (Please list each piece separately)	<i>POWER SOURCE</i> ◆ Electrical ◆ Propane ◆ Wood/coal	<i>NUMBER OF AMPS</i> (if electrical is required)	<i>VOLTAGE</i> (110 or 220)	<i>PHASE</i> (if 220) Single (1) or Three (3)

Please list the products and prices of each item you plan to sell, attach an additional list if needed.

ITEMS	PRICE

Back

Front (sketch floor plan with equipment – 10' x 10')

Authorized Vendor Signature: _____ Date _____

Mailing address:
 Eagan Art Festival
 C/O Art Works
 3795 Pilot Knob Road, Eagan, MN 55122
Director@eaganartfestival.org 651-269-2787