

BOROUGH OF LODI

2023

VENDOR EVENT
INFORMATION PACKET

FOOD VENDORS FILL OUT ENTIRE PACKET OUT

NON-FOOD VENDORS FILL OUT ALL BUT LAST TWO PAGES & PHOTO OF YOUR
SET-UP FROM A PREVIOUS EVENT INCLUDING SOME ITEMS

WHERE:

LENGTH OF MEMORIAL DRIVE BOTH SIDES
LODI NJ 07644

WHEN:

SATURDAY, OCTOBER 14, 2023 (RAIN DATE: SUNDAY, OCTOBER 15, 2023)
1:00PM - DARK (FIREWORKS TIME)

SET-UP:

VENDORS MUST BEGIN ARRIVING BY 11:30AM THE LATEST, SO THAT INSPECTIONS MAY BE COMPLETED IN A TIMELY MANNER. PLEASE BE SURE TO ARRIVE WITH ENOUGH TIME TO BE INSPECTED AND SET-UP, (EVENT WILL OPEN TO THE PUBLIC AT 1:00PM). *ALL TRUCKS ARE TO ARRIVE ACROSS THE STREET IN THE PARKING LOT OF 2 MEMORIAL DRIVE LODI, NJ. ONCE YOU ARRIVE YOU WILL SEE AN EVENT COORDINATOR THERE TO GREET YOU. ONCE GREETED YOU WILL BE NOTIFIED ON WHERE TO PARK ON MEMORIAL DRIVE. PLEASE FOLLOW THE EVENT COORDINATOR'S INSTRUCTIONS TO GET YOU SET UP!*

ALL TRUCKS WILL BE SUBJECT TO INSPECTION BY THE BOROUGH'S HEALTH INSPECTOR. THIS INSPECTION WILL BE SCHEDULED BY THE HEALTH INSPECTOR AND WILL TAKE PLACE THE DAY OF THE EVENT, FOR FOOD VENDORS ONLY. ALL TRUCKS USING PROPANE WILL ALSO BE SUBJECT TO INSPECTION BY THE BOROUGH'S FIRE OFFICIAL ONCE SET-UP, ANY TRUCK THAT DOES NOT PASS INSPECTION WILL NOT BE PERMITTED TO TAKE PART IN THE EVENT AND WILL NOT HAVE THEIR LICENSE FEE REFUNDED BACK TO THEM. ALL NON-FOOD VEHICLES MUST BE REMOVED FROM EVENT AREA AND PARKED IN DESIGNATED PARKING SPOTS AS SOON AS POSSIBLE.

BREAK-DOWN: ALL VENDORS **MUST** BEGIN BREAKING DOWN THEIR EQUIPMENT NO LATER 8:00pm; ALL VENDORS **MUST** BE OUT OF THE ROADWAY BY 9:00pm. THE ROADWAY WILL BE OPEN TO TRAFFIC AT 9:30pm.

DEADLINE:

ALL APPLICATIONS MUST BE FULLY COMPLETED, SIGNED AND RETURNED TO THE BOROUGH NO LATER THAN SEPTEMBER 25, 2023. PLEASE MAIL YOUR APPLICATION OR SUBMIT IN PERSON ALONG WITH ALL REQUIRED ENCLOSURES TO:

THE BOROUGH OF LODI

1 MEMORIAL DRIVE

ATTN: NORMA MORRISON (ROOM: 201)

LODI NJ 07644

REQUIRED ENCLOSURES (ALONG WITH APPLICATION):

- A CURRENT CERTIFICATE OF LIABILITY INSURANCE NAMING THE BOROUGH OF LODI AS AN ADDITIONAL INSURED FOR AT LEAST \$1 MILLION DOLLARS PLUS WORKERS COMPENSATION INSURANCE AS PROVIDED BY THE STATUTORY LIMITS.
 - TEMPORARY FOOD LICENSE APPLICATION [LICENSE WILL BE ISSUED PENDING INSPECTION]
 - APPLICATION PROVIDED WITHIN THIS PACKET
 - PAYMENT TO BE SUBMITTED VIA CASH OR CHECK WITH YOUR APPLICATION AND REQUIRED ENCLOSURES
 - MAKE CHECKS PAYABLE TO: ***BOROUGH OF LODI***
 - APPLICATION FOR FIRE PERMIT [PERMIT WILL BE ISSUED PENDING INSPECTION]
 - APPLICATION PROVIDED WITHIN THIS PACKET
 - PAYMENT TO BE SUBMITTED VIA CASH OR CHECK WITH YOUR APPLICATION AND REQUIRED ENCLOSURES
 - MAKE CHECKS PAYABLE TO: ***BOROUGH OF LODI***
 - A DETAILED LIST OF PROPOSED GOODS BEING SOLD AT THE EVENT ALONG WITH THE PRICE OF EACH ITEM
 - A PHOTO OF YOUR SET-UP FROM A PREVIOUS EVENT
 - COMPLETED AFFIRMATION AND LIABILITY RELEASE
- CONDITIONS:**

- ALL SPACES WILL BE ASSIGNED BY THE EVENT COORDINATORS. USE OF SPACE IS STRICTLY LIMITED TO THE ASSIGNED AREA(S).
- ANY ITEM NOT SPECIFIED ON THE APPLICATION WILL NOT BE PERMITTED FOR SELLING DURING THE EVENT. IF ANY CHANGES NEED TO BE MADE TO THE LISTED ITEMS YOU MUST CONTACT ONE OF THE EVENT COORDINATORS BY SEPTEMBER 25, 2023.
- PRICES OF ITEMS SOLD MUST BE LEGIBLY DISPLAYED IN A NEAT AND PROFESSIONAL MANNER.
- ALL VENDORS MUST PROVIDE ADEQUATE DISPOSABLE UTENSILS FOR CUSTOMERS (FORKS, KNIVES, SPOONS, PLATES, BOWLS, NAPKINS, ETC).
- ALL VENDORS ARE REQUIRED TO KEEP A NEAT, SAFE AND ATTRACTIVE SPACE.
- ALL VENDORS SHALL CONDUCT THEMSELVES IN A PROFESSIONAL MANNER, BE NEAT AND CLEAN IN APPEARANCE AND REFRAIN FROM USING ANY PROFANITY OF OTHER OBJECTIONABLE CONDUCT.
- MISCONDUCT OF ANY KIND WILL NOT BE TOLERATED, INCLUDING, BUT NOT LIMITED TO THE SALE OR ATTEMPTED SALE OF NARCOTICS.
- IT IS THE RESPONSIBILITY OF THE VENDOR TO OBTAIN ALL NECESSARY STATE AND LOCAL LICENSES AND PERMITS.
- *THE SALE OF ALCOHOLIC BEVERAGES IS STRICTLY PROHIBITED. *
- VENDOR MUST BE SELF-SUFFICIENT IN TERMS OF UTILITIES

PLEASE NOTE:

APPLICATIONS WILL BE APPROVED BASED ON DATE OF RECEIPT OF COMPLETED APPLICATION ALONG WITH ENCLOSURES AS WELL AS THE TYPE AND PRICE OF GOODS BEING SOLD.

THE BOROUGH OF LODI AND ITS EVENT COORDINATORS RESERVE THE RIGHT TO LIMIT THE NUMBER OF FOOD TRUCKS AT THIS EVENT.

CONTACT:

EVENT COORDINATOR NORMA MORRISON - 973-859-7406

HEALTH INSPECTOR: COUNTY OF BERGEN (201) 634-2780//973-859-7417

FIRE OFFICIAL: PAUL WANCO (973) 859-7428

**BOROUGH OF LODI
VENDOR APPLICATION**

PLEASE COMPLETE THIS APPLICATION AND SUBMIT BACK TO THE BOROUGH WITH ALL
REQUIRED ENCLOSURES. *MUST BE RECEIVED BY THE BOROUGH NO LATER
THAN SEPTEMBER 25, 2023*

BUSINESS NAME: _____

CONTACT NAME: _____

PHONE #: _____ E-MAIL: _____

ADDRESS: _____

TYPE OF ITEMS BEING SOLD: _____

MINIMUM LENGTH OF SPACE NEEDED: _____

FORMS OF PAYMENT ACCEPTED: _____

PLEASE PRESENT SEPARATE CHECKS AS LISTED BELOW: **Separate payments are
required per stand/space regardless if same vendor**

FOOD

\$ 125.00 VENDOR FEE CHECK MADE PAYABLE TO: BOROUGH OF LODI

\$ 25.00 HEALTH FEE CHECK MADE PAYABLE TO: BOROUGH OF LODI

\$ 54.00 FIRE FEE CHECK MADE PAYABLE TO: BOROUGH OF LODI

(Propane only)

NON-FOOD

\$50.00 VENDOR FEE CHECK MADE PAYABLE TO: THE BOROUGH OF LODI
(NON-LODI RESIDENT)

\$25.00 VENDOR FEE CHECK MADE PAYABLE TO: THE BOROUGH OF LODI
(LODI RESIDENT)

**PLEASE BE ADVISED THAT IF FOR ANY REASON YOUR APPLICATION IS NOT ACCEPTED PRIOR TO
THE DAY OF THE EVENT YOU WILL BE FULLY REFUNDED YOUR HEALTH AND FIRE FEES WITHIN 1
WEEK OF THE FINAL DECISION. IF YOU ARE DENIED PARTICIPATION DUE TO FAILED HEALTH OR
FIRE INSPECTION ON THE DAY OF THE EVENT YOU WILL NOT BE REFUNDED ANY OF THE FEES.
WE WILL ACCEPT AS MANY APPLICATIONS AS WE CAN BASED ON TYPE OF FOOD BEING OFFERED**

Affirmation and Liability Release

I, _____, hereby affirm that I have been well advised and thoroughly informed of the inherent hazards and policies of this event. I know that by participating in the **Borough of Lodi's EVENT**, that I am exposing myself to certain known and unknown liabilities in my direct or indirect actions with the public and invitees of this event. I also understand that if I choose to hire help for this event that I am directly responsible for their actions or injury. I hereby personally assume all risks associated with my voluntary participation in this event for any harm, injury or damage that may befall me or any employee or temporary help, as a result of my participation, whether foreseen or unforeseen.

I understand and agree that the Borough of Lodi, located in Bergen County in the State of New Jersey, its employees, officers, governing body, volunteers and designees may not be held liable in any way for any occurrence in connection with my participating in the **Borough of EVENT** that may result in injury, death, or other damages to me or my family, heirs or assigns and in consideration of being allowed to participate in this event, I hereby personally assume all risks in connection with said event for any harm, injury or damage that may befall me, including all risks connected herewith, whether foreseen or unforeseen; and further to save and hold harmless said event and persons from any claim by me, or my family, estate, heirs or assigns arising out of my participation in this event.

I further state that I am of lawful age and legally competent to sign this affirmation and release, or that I have acquired the written consent of my parents or guardians; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document of my own free will.

It is my intention by this instrument affirmed by my signature below to exempt and release the Borough of Lodi, its employees, officers, governing body, volunteers and designees from all liability whatsoever for personal injury, employer's liability and workers' compensation, property damage or wrongful death arising out of or in the course of my participation in this event.

I have fully informed myself of the contents of this affirmation and release by reading it before I signed it.

Company Name: _____

Signature of Participant: _____

Printed Name of Participant/Date: _____

**Borough of Lodi Health Department
Temporary Food Vendor Application
MUST BE FILLED OUT ALONG WITH FEE ABOVE**

Category: Food _____ Mobile Truck _____ Ice Cream Truck _____ Other _____

HOME FOOD PREPARATION/STORAGE IS NOT PERMITTED

Are you a non-profit organization? Yes _____ No _____

Company/Organization Name: _____

Business Address: _____

Business Phone #: _____

Type of Ownership: Self _____ Partnership _____ Corporation _____ Other _____

If other, please explain: _____

Name of Contact Person (person present day of event): _____

Daytime #: _____ Cell Phone #: _____

Type of Food to be Served: _____

Where is Food Purchased? _____

Please Give a Short Description of your Operation:

Do You Have Refrigeration? Explain: _____

Do You Have Hand Washing Facilities? _____

Food Handler Class Attended? Yes ___ No ___ Date: _____ Provide Copies of Certificates

***INSPECTION BY THE BOROUGH'S HEALTH OFFICER WILL BE CONDUCTED UPON ARRIVAL AT THE EVENT.
ANY VENDOR WHO DOES NOT PASS THE HEALTH INSPECTION WILL NOT BE PERMITTED TO TAKE PART IN
THE EVENT AND WILL NOT HAVE THEIR LICENSE FEE REFUNDE.**

Applicant's Name (Print) _____ Signature: _____ Date: _____

Office Use Only: Fee \$ _____ Date Rcd: _____ Approved: _____ Payment Type: Cash/Check

Inspector's Signature: _____ Date Inspected: _____

Borough of Lodi
Fire Prevention Bureau
APPLICATION FOR PERMIT
Fee: \$54.00

The Uniform Fire Code states:

Permits shall be required and obtained from the local enforcing agency for the activities specified in this section, except where they are an integral part of a process or activity by reason of which a use is required to be registered and regulated as a life hazard use. Permits shall at all times be kept in the premises designated therein and shall at all times be subject to inspection by the fire official.

Date of Application: _____

Location where activity will occur: _____

Date: _____ Time: _____

Applicant Name: _____ Address: _____

Organization Name: _____

Phone #: _____ Emergency #: _____

The above names applicant hereby requests permission to conduct the following activity at the above indicated location:

And for keeping, storage, occupancy, sale, handling or manufacture of the following:

State quantities for each category to be stored or used and the method stored or used: _____

I hereby acknowledge that I have read this application, that the information given is correct and that I am the owner or duly authorized to act in the owner's behalf and as such hereby agree to comply with the applicable requirements of the fire code as well as any specific conditions imposed by the fire official.

Applicant Signature /Date

OFFICE USE ONLY:

Paul Wanco, Fire Official

Fee Paid(yes/no)

Permit Type

*INSPECTION BY THE BOROUGH'S FIRE OFFICIAL WILL BE CONDUCTED UPON ARRIVAL AT THE EVENT. ANY VENDOR WHO DOES NOT PASS THE FIRE INSPECTION WILL NOT BE PERMITTED TO TAKE PART IN THE EVENT AND WILL NOT HAVE THEIR PERMIT FEE REFUNDED.