Holiday Boutique – November 26, 2016

Early Bird Registration: October 21st for name to be listed in the program

Vendor Rules/Guidelines & Application

HOLIDAY BOUTIQUE DETAILS – Rain or Shine

Boutique Hours: 11:00 am to 6:00 pm
Location: Veterans' Memorial Building, 649 San Benito Street

Schedule of Events:

9:00 – 10:00 am Vendor Set-Up (unloading must be completed by 10:45 am)
4:30 – 5:15 pm Pre-Parade Entertainment
6:00 – 7:00 pm Vendor Tear-down (no leaving early due to liability, even if sold out)
5:30 – 7:00 pm Parade
7:15 – 8:30 pm Photos with Santa & Mrs. Claus in the Plaza at Vet's Hall

HDA CONTACT INFORMATION

Boutique Manager: **Teri Escamilla**
Office Hours: 8:00 am to 5:00 pm, Monday–Friday
Phone: **831.636.8406**
FAX: 831.636.5909
Address: 514 Monterey St., Hollister, CA 95023
E-Mail: events@downtownhollister.org

PARTICIPANT BOOTH TYPES & FEES (Booth fee includes City of Hollister Business License Fee)

Single Booth Fee (10 x 10): $116
Double Booth Fee (10 x 20): $196
Table & Chair Rental Fee: **$15 per 6' table, $6 per chair**
Electricity Fee: $30 (Hook-ups are limited!)
Box Lunch: $12 (Delivered to your booth. Menu choices TBD)

NOTE: HDA members and Non-profits receive ½ price on Booth Fee

DEADLINE

Early-bird Registration: **October 21, 2016** for name listed in marketing material
All applications due by **Wednesday, November 23, 2016** by 5:00 pm

PAYMENT PROCEDURES

Payment must be submitted by cash or check (payable to HDA) prior to the Holiday Boutique, along with the COMPLETED application and required permits. Incomplete applications will not be processed.

REQUIRED PERMITS & DEADLINES

Copies of each applicable certificate and/or permit must be submitted with application.
All appropriate information must be included for an application to be processed.

Health Permit (fee required) Required if giving out samples and/or selling prepared food products. **DEADLINE: November 11, 2016**	San Benito County Health Department 1111 San Felipe Road, Suite 101 Hollister, CA 95023 (831) 636-4035 www.sanbenitoco.org
Resale Permit (no fee required) **DEADLINE: November 23, 2016 (over the counter)**	California State Board of Equalization 111 E. Navajo Drive, Suite 100 Salinas, CA 93906 (831) 443-3003 www.boe.ca.gov

Please note: A Hollister Business License fee is included in the Boutique Booth fee.
This license is a temporary event specific fee and is required by the City of Hollister.
Application is attached to the Boutique application.

RESERVATIONS & SPACE ASSIGNMENTS

1. Applications must be received by the Boutique Manager by **Wednesday, November 23, 2016.**
2. Applicants must accept the space given to them by the Boutique Manager.
3. Incomplete applications or those missing required permits will not be processed until all items are submitted.
4. Selection of Boutique vendors is at the discretion of the Boutique Manager, based on the vendor's ability to enhance the overall Boutique image and offerings.
5. All vendor merchandise must be listed and approved through the application process.

GENERAL RULES

1. Children of vendors (age 10 and under) must be accompanied by an adult at all times while participating in the Boutique.
2. Smoking or drinking of alcoholic beverages is not permitted.
3. Applicants are responsible for the actions of their employees, representatives, or agents.
4. All applicants must comply with all applicable Federal, State, County, and local laws, ordinances and regulations.
5. The Boutique Manager will implement and enforce all rules and regulations pertaining to the operation of the Boutique in a fair and equitable manner.

BOOTH DISPLAY

1. Applicants are responsible for removing any and all trash that accumulates in their area. Applicants must bring their own trash receptacles and carry out their own trash. Use of the Veteran's Building trash containers by applicants will result in a $100 fine.
2. Vendors may not provide music or entertainment. Holiday music will be playing during the event.
3. There is only one Santa and he will be arriving at the end of the parade, heading to the Plaza area for "Pictures with Santa." Santa hats are okay, but no other Santa will be allowed.
4. No tape or staples may be used on the floor or wall. Personal chairs and tables must have tape, fabric, or leg cups to protect wood floor.

2016 Hollister Downtown Association

Lights On Celebration Boutique Vendor Application

Please fill in the information below, read the Information, Rules, & Guidelines included with this application, and return the completed form *including copies of required certificates and/or permits* to the **Hollister Downtown Association**, 514 Monterey Street, Hollister, CA 95023.

DEADLINE: Wednesday, November 23, 2016 at 5:00 pm. Make check payable to the HDA.

PLEASE PRINT

Business Name: _____

Contact Name: _____

Email Address: _____

Mailing Address: _____

Phone: _____ Fax: _____

Booth Operator's Name _____

Seller's Permit_____Driver's License_____

(Only if Seller's Permit not Required)

Please give a brief description of all products that you wish to sell at the Boutique:

_____

☐ Single Booth	$116 or ☐ $66 Non-Profit or HDA Member	
☐ Double Booth	$196 or ☐ $106 Non-Profit or HDA Member	
☐ Table Rental	$ 15 per 6' table _____ Qty	**TOTAL AMOUNT ENCLOSED**
☐ Chair Rental	$ 6 per chair _____ Qty	
☐ Electricity	$ 30 (limited hook ups)	
☐ Box Lunch	$ 12 (menu choices to be provided)	$_____

By being accepted to sell at the Hollister Downtown Association's Lights On Celebration Boutique (LOCB), the applicant agrees to abide by all State, Local, and LOCB rules & regulations and all decisions made by the Manager and the LOC Committee. The applicant agrees to indemnify & save harmless the Hollister Downtown Association, its Board of Directors, agents, servants, and employees from any damage, injury, or loss to any persons, including, but not limited to persons who the applicant may be liable under any Workman's Compensation Law and the seller him/herself, and from any loss damages, caused of action claims or suits for damages or in any other liabilities whatsoever, for the failure to operate the Boutique due to destruction by fire, other calamity, or by an act of God, strikes, statues, ordinances, or any legal authority or any other cause beyond the LOCB's control.

I HAVE READ AND UNDERSTAND THE RULES, REGULATIONS, AND POLICIES HEREIN, AND AGREE TO CONFORM TO THE RULES, REGULATIONS AND POLICIES CONTAINED HEREIN. FAILURE TO CONFORM WILL RESULT IN DISMISSAL OF MY PRIVILEGE FOR FUTURE LIGHTS ON CELEBRATION BOUTIQUES.

APPLICANT'S SIGNATURE _____

PRINT NAME_____ DATE _____

Office: Date Received: _____ **Payment Information:** _____

***PLEASE SEND IN THIS FORM WITH THE LIGHTS ON BOUTIQUE VENDOR APPLICATION TO THE HDA ***

CITY OF HOLLISTER

Finance Department
339 Fifth Street
Hollister, CA 95023
Phone: (831) 636-4301
Fax: (831) 634-4913
wwww.hollister.ca.gov

Business License Number

New _____

Renewal_____

NON-REFUNDABLE BUSINESS LICENSE TAX APPLICATION

Print or type all applicable information

☐ Corporation Corporate Name: _____

☐ Sole Proprietorship ☐ Husband & Wife Sole Proprietorship ☐ Partnership ☐ Non-Profit Org. (Exempt) ☐ LLC

Business Name (doing business as) _____

Business Description (detailed summary) _____

Business Address (address, city, state, zip code) ☐ Home based business? - Home Occupation Permit required

_____

Mailing Address if different from above (address, city, state, zip code)

_____

Web Page Address_____ E-mail address _____

Opening Date _____ Business Phone _____ Fax No. _____

No. of employees _____ Sales Tax Number _____

State Contractor's License No. & Class _____ Expiration Date _____

Owner or Officer Names(s)/Title:

_____
Name Address (City, State, Zip code) Phone

_____
Name Address (City, State, Zip code) Phone

NOTICE: Issuance of a business license does not give you permission to operate a business that violates federal, state or local laws. You are urged to check with the appropriate city and county departments for further information about those regulations affecting your business PRIOR to paying the business license tax. ONCE PAID, BUSINESS LICENSE TAXES WILL NOT BE REFUNDED.

READ AND INITIAL _____

Planning 636-4360 Code Enforcement 636-4365 Health 636-4035 Police 636-4330 Building 636-4355 Fire 636-4325

I hereby certify under penalty of perjury that I have read the foregoing, and that the information provided is true and correct.

_____
Applicant Signature Print (Signature Name) Date

The Business License Tax is to be submitted with this application

For Internal use only:

Ordinance Section _____ License Type_____

Business License Tax $ _____

Penalties (if applicable) $ _____ Payment Method:

Total Due $ _____ ☐ Check ☐ Cash ☐ Visa/MC

Expiration Date _____ Processed by _____

CITY OF HOLLISTER

Finance Department
339 Fifth Street
Hollister, CA 95023
Phone: (831) 636-4301
Fax: (831) 634-4913
wwww.hollister.ca.gov

No. De Licencia de Negocio

☐ Nuevo _____

☐ Renovación_____

APLICACIÓN DE IMPUESTO DE LICENCIA COMERCIAL NO REEMBOLSABLE

Escriba o Imprima

☐ Corporación Nombre De Corporación: _____

☐ Negocio Propio ☐ Negocio De Esposo Y Esposa ☐ Asociación ☐ Organización No Lucrativa ☐ LLC

Nombre de Negocio (haciendo negocios como) _____

Descripción Del Negocio (resumen detallado) _____

Dirección Del Negocio (Ciudad, Estado,Código Postal) ☐ Negocio Basado En Casa? - Se Requiere Permiso de Ocupacion

_____

Dirección de Correco_Si es diferente de la anterior (Dirección, Ciudad, Estado,Código Postal)

_____

Dirección De Pagina Web _____ Dirección De Correo Electronico_____

Fecha De Apertura _____ No. Teléfono de Negocio _____ Fax No._____

No. De Empleados _____ No. de Identificación Fiscal(Sales Tax #) _____

No. Y Clasificación De Licencia De Contratista Del Estado _____ Fecha De Vencimiento_____

Nombre/Titulo Del Dueño u Oficial:

_____
Nombre Dirección, Ciudad, Estado,Código Postal Teléfono

_____
Nombre Dirección, Ciudad, Estado,Código Postal Teléfono

NOTICIA: La Emisión de la licnecia de negocio no le da permiso de operar un negocio que viole las leyes Federales, Estatales o Locales. ANTES de pagar, se le urge que usted verifique con los departamentos apropiados de la Ciudad y Condado para obtener más información acerca de cualquier regulación que pudiese afectar su negocio . YA PAGADO, EL IMPUESTO DE LICENCIA DE NEGOCIO NO SERÁ REEMBOLSABLE

IMPUESTO DE LICENCIA DE NEGOCIO NO ES REEMBOLSABLE

Lea y Marque con sus Iniciales

Planning 636-4360 Code Enforcement 636-4365 Health 636-4035 Police 636-4330 Building 636-4355 Fire 636-4325

Por la presente certifico bajo pena de perjurio que e leido todo lo anterior y que la información proporcionada es correcta y verdadera.

_____
Firma del Aplicante Imprimir (Nombre de Firmante) Fecha

El pago deimpuesto de la licencia de negocio debe ser sometido con esta aplicacion.

Para Uso Interno Solamente

Sección de la Ordinaza _____ Tipo De Licencia (License Type) _____

Impuesto De Licencia de Negocio $ _____

Penalidad (si se aplica)Penalties $ _____ Metodo de Pago (Payment Method):

Total a Pagar/Total Due $ _____ ☐ Cheque/Check ☐ Efectivo/Cash ☐ Visa/MC

Fecha De Vencimiento _____ Preparado Por _____
Expiration Date Processed by