

## ELIGIBILITY AND RULES

Vendor will obey all provisions of this Agreement & all rules for safety, security, parking, volunteers, State laws, City Ordinances and any and all other applicable requirements.

If you are a new vendor. Three photographs or slides of your work and one photograph or slide of your booth set-up must be included with the application or available electronically.

Vendor shall obtain a City of Sausalito business license. The license may be limited to the event date provided that vendor does not otherwise conduct business operations in the City.

Vendor acknowledges and agrees that it will comply with the following time requirements on the event date regarding set up, operation, breakdown and vehicular access to Caledonia Street.

- Vendor may begin booth set up no earlier than 7am
- Vendor vehicular access to Caledonia Street will cease at 8:45am and no exceptions will be granted
- Vendor will complete booth set-up no later than 10am
- In order to provide adequate variety, activity and safety to the patrons of the event, Vendor is required to operate it's booth from 11am - 6pm
- Vendors will be provided with vehicular access to Caledonia Street at 6pm
- Breakdown begins at 6pm (and no earlier) and must be completed at or before 7pm

Vendor is expressly prohibited from selling food &/or beverages including without limitation water & tea.

Vendors must provide their own tent/umbrella, tables, table coverings, chairs and decorations. There are no electrical outlets. A 10' X 10' white pop up tent is preferred.

Vendors handle their own sales transactions. Make sure you have enough change for the day. (The Caledonia Street Spring Faire and the City of Sausalito do not take a percentage of your sales.)

All fees are non-refundable. This is a rain or shine event.

There is a \$25 late fee for applications postmarked after April 16th, 2010. There is a \$20 charge for returned checks.

Copies, knock-offs, look-a-likes or fakes of designer items are not permitted. If vendor displays any of these items vendor will be asked to leave the event and not invited back next year. Fees will not be refunded.

The individual executing this Agreement on behalf of Vendor has the full authority to enter into this Agreement on behalf of Vendor.

It is understood that a breach of this Agreement will result in elimination from any future Caledonia Street Spring Faire participation, failure to comply with this Agreement can result in immediate removal from the Faire.

## DEADLINES AND DATES

Application deadline is April 16th 2010. Late applications will be considered if space is available. We are accepting applications on a first come first serve basis. Notification of acceptance will be sent out on or before April 30th 2010.

## CHECKLIST

- Completed and signed application
- Booth fee
- City of Sausalito temporary business license form OR copy of Sausalito business license
- City of Sausalito temporary business license fee
- 3 photographs/slides of your work (new vendors) \*links to your website also appreciated (new/old)
- 1 photograph of your booth set up (new vendors)

## PLEASE RETURN TO:

City of Sausalito  
Parks & Recreation Department  
Attn: Erin Stroud  
Caledonia Street Spring Faire  
420 Litho Street  
Sausalito, CA 94965

For additional information:  
[www.caledoniastreetsspringfaire.com](http://www.caledoniastreetsspringfaire.com)  
[estroud@ci.sausalito.ca.us](mailto:estroud@ci.sausalito.ca.us)  
415.289.4152  
415.289.4189 fax

# ARTIST APPLICATION



Sausalito Nursery School



Artist Name:

Contact Person:

Business Name:



Address:

City:

State:

Zip Code:

Phone #:

Fax #:

Email:

Website:

## CATEGORY



- Painting
- Woodwork
- Photography
- Clothing
- Sculpture
- Glass/Ceramics
- Mixed Media
- Jewelry
- Other \_\_\_\_\_
- Graphics, Prints & Drawings

## FEES (PLEASE MAKE CHECKS PAYABLE TO CITY OF SAUSALITO)

Booth Size: 10'X10' (\$185) \_\_\_ 10'X15' (\$250) \_\_\_ (10% off) 10'X20' (\$315) \_\_\_ (15% off)

Business License Fee: \$35 \_\_\_ or Sausalito Business License #: \_\_\_\_\_

Discount: Returning Artists & Vendors are eligible for a \$35 discount: \_\_\_\_\_

Corner Booth: \$40 \_\_\_

Total: \_\_\_\_\_

## RELEASE

Vendor shall indemnify, defend and save the City of Sausalito and the Sausalito Nursery School, its officers, elected and appointed officials, employees, contractors and agents harmless from and against any and all liability, claims, suits, actions, damages and/or causes of action of any kind arising out of any bodily injury, personal injury, property damage or in violation of any federal, state or municipal law or ordinance or other cause in connection with the activities of Vendor, or on account of the performance or character of the Vendor's operation of the booth or otherwise related to its performance of this Agreement to the extent that any such liability, claims, suits, actions, damages and/or causes of action arises out of the intentional, negligent or willful misconduct of the Vendor.

\_\_\_\_\_  
Artist Signature

\_\_\_\_\_  
Date

**City of Sausalito Business License**  
Finance Department  
420 Litho Street  
Sausalito, CA 94965  
800-987-0999



## Temporary Business License Application/Renewal

Event Name: \_\_\_\_\_

Event Year: \_\_\_\_\_

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

Business Phone \_\_\_\_\_

Business Description **TEMPORARY BUSINESS LICENSE**

Business Class Code **TEMP**

Business Address \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Temporary Business License

*Please remit the below fees based on the number of days business is conducted within the City of Sausalito.*

**(1) Temporary Business License Tax Rate:**

(a) 1-Day Special Event = \$20.00

(b) 2-Day Special Event = \$35.00

(c) 3-Day Special Event = \$50.00

**(2) Total License Amount Due:** \$ \_\_\_\_\_ [Enter Rate 1(a), 1(b), or 1(c) on this line].

**(3) Processing Fee** \$ 15.00 \_\_\_\_\_

**(4) Total Amount Due:** \$ \_\_\_\_\_ [Add line 3 and 4].

*This is to acknowledge I am the owner of the business declared above. I am paying the current year license fee. I understand that if I submit false information, it is a violation of the city ordinance and will be held responsible to the fullest extent.*

Owner's Name \_\_\_\_\_  
(Please print)

Signature \_\_\_\_\_

Date \_\_\_\_\_



# City of Sausalito Declaration of Information

Please complete this form in its entirety as it applies to your business activity in the City of Sausalito. If you need any assistance completing this application, please contact a MuniServices Representative, Monday through Friday, 8:00am to 5:00pm Pacific Time

Reference #<taxpayerid>

## Section I Variable Information

Business Name	Phone #	Fax #
Business Address	City	State Zip
Mailing Address (if Different)	City	State Zip
E Mail Address (Optional)		
Owner Name	Phone #	
Owner Address	City	State Zip
SSN/FEIN #	SEIN #	
State Resale License #	Contractor License #	

Start Date of Business (In Sausalito): \_\_\_\_\_

Description of Business: \_\_\_\_\_

Home Based Business: YES / NO

Is your business income generated from activity performed within the City of Sausalito? YES / NO

## Section II License Information

Please complete the following variable information table for the applicable tax years. If you need any assistance in which variables apply to your business, please contact a MuniServices Representative, Monday through Friday, 8:00am to 5:00pm Pacific Time. Once this section is complete, please sign the certification and fill out the applicable application(s) and return them to MuniServices Company in the envelope provided.

Information Period runs from January 1<sup>st</sup> through December 31<sup>st</sup> annually

Year	Gross Receipts	Number of Residential Rental Units	Number of Vehicles Used for Business
2009			
2008			
2007			
2006			

## Section III Certifications

I certify under the penalty of perjury that the information in Section I is accurate and correct to the best of my knowledge and belief.

Signature of person authorized to sign for firm	Date	Phone Number
Title	FEIN or Social Security Number	

<ps\_trynum>

# Business License

## City of Sausalito Credit Card Authorization Form



Card Type:  \_\_\_\_\_ Visa  \_\_\_\_\_ MasterCard

Card Holder Name \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Card Expiration Date \_\_\_\_\_ CVV2\* \_\_\_\_\_ (\*3-digit number on back of card)

Billing Address of Card Holder \_\_\_\_\_

Telephone #: \_\_\_\_\_ Billing Zip Code of Card Holder \_\_\_\_\_

Amount of Payment \$ \_\_\_\_\_

*I hereby authorize the City of Sausalito to utilize the credit card listed above for payment of my business license Fee. Must be satisfied prior to a business license being issued*

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

# Booth Fee

## City of Sausalito Credit Card Authorization Form



Card Type:  \_\_\_\_\_ Visa  \_\_\_\_\_ MasterCard

Card Holder Name \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Card Expiration Date \_\_\_\_\_ CVV2\* \_\_\_\_\_ (\*3-digit number on back of card)

Billing Address of Card Holder \_\_\_\_\_

Telephone #: \_\_\_\_\_ Billing Zip Code of Card Holder \_\_\_\_\_

Amount of Payment \$ \_\_\_\_\_

*I hereby authorize the City of Sausalito to utilize the credit card listed above for payment of my Caledonia Street Spring Faire 2010 Booth Fee.*

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