



2024 Vendor Contract Food Trucks & Floaties

Date: July 27, 2024 **Rain Date:** August 3, 2024

Time: 11 a.m. – 4 p.m. Vendor must be set up and ready to serve event attendees by the event start time and continue to serve until designated end time, unless prior arrangements have been made with the Baileys Harbor Community Association (BHCA) Coordinator.

Location: Food Trucks & Floaties, Anclam Park, Baileys Harbor, WI. The BHCA Coordinator will assign vendor spaces and may be reassigned up until the day prior to the event, as needed. It is the vendor’s responsibility to review the map provided by the coordinator upon receipt. BHCA will make every effort to accommodate special requests, but this contract does not guarantee agreement unless specified in writing.

Parking: All extra vehicles must be parked in the designated parking area 1 hour prior to the opening time of the event. No additional vehicles are allowed onsite; street parking is available.

Weather: In the event of rain or poor weather conditions, the event *may* be rescheduled or canceled. The BHCA Coordinator will notify the primary individual listed on this contract in person or by telephone using the contact number and/or email listed in this agreement as soon as a decision has been made about alternate arrangements. The BHCA is not responsible for any loss, theft, damages, or emergency situations including weather.

Event Fee: \$100 Check this box for electric hook-up \$200

If the vendor needs to cancel participation in the event, the event fee may be refunded as follows: 100%, if canceled one month prior to the date of the event. No refund of payment will be made if the vendor cancels participation less than one month prior to the date of the event. No refund will be paid, if the vendor does not appear for the event, unless the vendor has received official notification of cancellation from the BHCA Coordinator. If the event is rescheduled, the vendor and BHCA Coordinator will determine if this contract and fee paid will be applied to the rescheduled date.

Event location guidelines: The vendor understands and agrees to the following:

Electrical power is not provided unless you have indicated a need for electrical hook-up and agree to pay the additional fee (see page 1).

No running water is available on site and no flowing water set-up is allowed.

All waste and recycling must be placed in the appropriate dumpsters placed on site.

No smoking or use of inappropriate language or swearing is permitted by vendors and vendor staff on the grounds of the event.

Vendors acknowledge that dogs/pets may be permitted on the grounds of the event.

Vendors will not cause any damage to the Park Grounds or other vendors property.

Vendors will be asked to leave if they do not adhere to the guidance provided above.

Business Name : _____

Primary Contact Name: _____

Primary Contact Mailing Address: _____

Primary Contact Email Address: _____

Telephone number for day of event: _____

Business website address: _____

Business Facebook page name: _____

Promotion: Enter a description of your product(s) below. Email a photograph of your business logo to be used by BHCA for marketing the event to: info@baileysharbor.com

BHCA contact person: Cynde Krowas, Community Coordinator/Destination Director;
920-421-4366 or info@baileysharbor.com

You must complete the required Department of Revenue form found on the following page, prior to signing the contract.

For information about the requirements: <https://www.revenue.wi.gov/Pages/FAQS/ise-wtep.aspx#wtep8>

Wisconsin Seller's Permit Number (15 digits starting with 456) 456- -		SSN (last 4 digits)	FEIN (last 4 digits)	Exemption Code
Legal Business Name (if not sole proprietor)		Doing Business As (DBA) Name (if applicable)		
Vendor/Contact Name (Last)		Vendor/Contact Name (First)		Vendor Phone Number
Mailing Address			Email Address	
City	State	Zip	Multi-Level Marketing Company (if claiming Code 2 above)	

- **Wisconsin Seller's Permit Number:** A Wisconsin seller's permit number has 15 digits and begins with 456 (456-xxxxxxxxxx-xx). Sellers may apply for a Wisconsin seller's permit at tap.revenue.wi.gov/btr.
- **SSN and FEIN:** The last 4 digits of the SSN are required. If the vendor has a FEIN, enter both numbers.
- **Exemption Code:** If the vendor claims an exemption from collecting and remitting sales tax, enter the exemption code number. Exemptions are limited to the following four reasons:
 1. **Exempt sales only or display only:** Exempt sales refers to nontaxable sales. Display only refers to a vendor advertising goods and services but not selling merchandise.
 2. **Multi-level marketing (MLM) company pays sales tax:** Multi-level marketing companies are those companies that sell their products through distributors. The department regards the multi-level marketing company as a retailer required to remit sales tax on sales to its distributors. Distributors for such companies may use this exemption code if the distributor only sells products for which the multi-level marketing company has already collected and remitted Wisconsin sales tax on the retail sales price of the products.
 3. **Nonprofit occasional sales exemption:** Sales by nonprofit organizations may qualify for exemption from Wisconsin sales and use tax. Refer to [Fact Sheet 2106](#) or Publication 206, Sales Tax Exemption for Nonprofit Organizations, for more information.
 4. **Occasional sales exemptions:** A person is not required to hold a Wisconsin seller's permit if the person's taxable sales are less than \$2,000 in a calendar year. Refer to Publication 228, Temporary Events, for more information.
- **Legal Business Name:** If the vendor is a sole proprietor leave blank
- **Doing Business As (DBA) Name:** The name commonly used by the business if different than the legal business name. Leave blank if not applicable.
- **Vendor/Contact Name:** Vendor's first and last name are required.
- **Mailing Address:** We may send confidential information to this address.
- **Email address and phone number:** Contact information for the vendor selling at the event.
- **Multi-Level Marketing Company Name:** Required if claiming exemption code 2. Enter name of company that remitted the tax.

S-240-INSTR (N. 6-22)

Please sign and return this contract to the Baileys Harbor Community Association (BHCA) **no later than May 31, 2024** by email at info@baileysharbor.com or postal mail, PO Box 31, Baileys Harbor, WI 54202. A copy of your food license, and/or other applicable license and proof of insurance coverage must be submitted with this contract form.

Please retain a copy of this document for your records; a copy will not be returned to you.

Primary Contact (print and signature)	Date:
Baileys Harbor Community Association	Date:
Cynthea Krowas <i>Cynthea Krowas</i>	January 19, 2024