

SPONSORED BY THE FLATBUSH DEVELOPMENT CORP

# FLATBUSH FROLIC

**WHEN: SUNDAY, SEPTEMBER 27<sup>TH</sup>, 2020**

NYC DOES NOT ALLOW RAINDATES

**TIME: 10 AM to 6 PM**

**LOCATION: CORTELYOU ROAD – CONEY ISLAND AVENUE TO OCEAN AVENUE**

PLEASE PRINT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY OR BOROUGH: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ OTHER: \_\_\_\_\_

TYPE OF MERCHANDISE (BE SPECIFIC ): \_\_\_\_\_

NEW YORK CITY CONSUMER AFFAIRS LICENSE PERMIT NUMBER: \_\_\_\_\_

CONSUMER AFFAIR LICENSE START DATE \_\_\_\_\_ LICENSE EXPIRATION DATE \_\_\_\_\_

NEW YORK STATE SALES TAX I.D. NUMBER: \_\_\_\_\_

**EARLY REGISTRATION RATE APPLIES TO PAYMENTS RECEIVED BY AUGUST 27<sup>TH</sup>**

EARLY REGISTRATION FEE: General Vendors - \$125 - Food Vendors - \$300 - Corporate Fee - please call

LATE REGISTRATION FEE: General Vendors - \$135 - Food Vendors - \$350 - Corporate Fee - please call

SPOT SIZE: 10' Deep by 10' Feet Long

**PLEASE NOTE:**

1. PLACEMENT FOR SPACE IS ON FIRST PAY, FIRST SERVE BASIS.
2. **SETUP STARTS AT 9AM.**
3. ALL FEES ARE NOT REFUNDABLE. THERE ARE NO RAIN DATES
4. VENDORS **MUST** PROVIDE A NEW YORK CITY CONSUMER AFFAIRS I.D. NUMBER AND NEW YORK STATE TAX I.D. NUMBER. FOOD VENDORS MUST OBTAIN A NYC HEALTH PERMIT.
5. FESTIVAL IS SUBJECT TO MAYORS OFFICE FINAL APPROVAL
6. A SUMMONS ISSUED OR FINE INCURRED TO THE EVENT PRODUCER, OR SPONSOR OF THIS EVENT, RESULTING FROM A VENDORS VIOLATION OF THE LAWS, RULES OR REGULATIONS OF THE CITY OF NY, OR ANY AGENCY THEREOF, WILL BE THE RESPONSIBILITY OF THE VENDOR
7. SOUND/MUSIC PLAYED FROM VENDORS BOOTH IS SUBJECT TO THE EVENT SPONSOR & PRODUCERS DISCRETION
8. MAIL CONTRACT TOGETHER WITH MONEY ORDER (**NO CHECKS**) PAYABLE TO:

**METEOR FESTIVALS**

PO Box 205001

Brooklyn, New York 11220

**For information: 718-444-6028 or [streetfairsny.com](http://streetfairsny.com)**

The undersigned Exhibitor/Vendor hereby acknowledges that he/she has read application and accepts all of its terms and conditions

SIGNATURE \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_ EMAIL \_\_\_\_\_