



**25th Annual Pittsburg Seafood Festival**  
**September 12th and 13th, 2009**  
[www.pittsburgseafoodfestival.com](http://www.pittsburgseafoodfestival.com)  
 485 Railroad Avenue Pittsburg, CA 94565  
 Tel (925) 432-7301 Fax (925) 427-5555  
[chamber@pittsburgchamber.org](mailto:chamber@pittsburgchamber.org)

## FOOD VENDOR APPLICATION

Restaurant Name:		Date:
Sellers Permit #:		
Business/Home Address:		
Mailing Address:		
City:	State:	Zip:
(Business) Phone Number:		(Cell) Phone Number:
(Home) Phone Number:		Fax Number:
Owner's Name:		
Website:		E-mail:

Menu: EACH items primary ingredient MUST be Seafood and is subject to Restaurant Committee approval.

Because so many restaurants serve the same menu items, we ask that you put them in order by preference

1. \_\_\_\_\_ % Seafood \_\_\_\_\_      2. \_\_\_\_\_ % Seafood \_\_\_\_\_
3. \_\_\_\_\_ % Seafood \_\_\_\_\_      4. \_\_\_\_\_ % Seafood \_\_\_\_\_
5. \_\_\_\_\_ Specialty Item containing chicken, beef, or pork (sausage as an ingredient only) pending approval

### Which type of Booth are you applying for?:

- A** Standard Booth (No deep fat frying)  Yes
- B** Deep Fat Frying Booth  Yes

**Electrical:**  Yes

If yes what is the power for: \_\_\_\_\_

The Pittsburg Chamber of Commerce encourages you to bring a back up generator in case of power failures.

**BBQ Area:**  Yes

**Water:**  Yes

**Health Department Exempt**  Yes

**I will need Chamber Group Insurance**  Yes  
 (Estimated 2009 Cost \$125.00)

If you have any questions please call the Chamber at 925-432-7301 for assistance, we are here to help.

# A

## STANDARD BOOTH (NO DEEP FAT FRYING ALLOWED)

**Restaurant Name :** \_\_\_\_\_

Qty.	Item	Description	Cost	Please Complete
1	Application Fee	Non-Refundable Standard Booth	\$100	\$100
1	Fire Department Permit	1 Permit per Festival location Standard Booth	\$100	\$100
1	Health Department Permit	1 Permit per Festival location	\$100	\$100
1	Food Vendor Booth	10 X 10 Booth	\$600	\$600
1	Power/Electricity	110 Volt Service	\$50	\$50
			<b>TOTAL</b>	<b>\$950</b>
	<b>Multiple Food Vendor Booths</b>	10 X 10 Booth Multiple	\$600 each	
	<b>Additional Locations</b>			
	Additional Booth Location	**Additional Location Fire Department Permit	\$100 each	
	Additional Booth Location	**Additional Location Health Department Permit	\$100 each	
	<b>Chamber Insurance</b>		\$125	
<b>TOTAL BOOTH SPACES:</b> _____			<b>TOTAL LOCATIONS:</b> _____	<b>TOTAL AMOUNT:</b> \$ _____
<b>**Each Festival location requires a Health and Fire Permit. Please read attached information regarding permits**</b> <b>**No deep fat fryer allowed to be prepared in your Booth**</b>				
I hereby agree to abide by the rules and regulations of the festival and to comply with the regulations of the Contra Costa Health & Fire Department.				
Signature: _____			Date: _____	

# B

## DEEP FAT FRYER BOOTH (can include other items)

**Restaurant Name :** \_\_\_\_\_

Qty.	Item	Description	Cost	Please Complete
1	Application Fee	Non-Refundable Deep Fat Frying Booth	\$100	\$100
1	Fire Department Permit	1 Permit per Festival location	\$100	\$100
1	Health Department Permit	1 Permit per Festival location	\$100	\$100
1	Deep Fat Frying Booth	10 X 20 Booth: 1 - 10 Gallons of Fat	\$1,200	\$1,200
1	Power/Electricity	110 Volt Service	\$50	\$50
			<b>TOTAL</b>	<b>\$1,550</b>
	<b>Multiple Deep Fat Frying Booths</b>			
	Double	20 X 20 Booth Multiple: 11 - 20 Gallons of Fat	\$1,200 each	
	Triple	30 X 20 Booth Multiple: 21 - 30 Gallons of Fat	\$2,400 each	
	<b>Additional Locations</b>			
	Additional Booth Location	**Additional Location Fire Department Permit	\$100 each	
	Additional Booth Location	**Additional Location Health Department Permit	\$100 each	
	<b>Chamber Insurance</b>		\$125	
<b>TOTAL BOOTH SPACES:</b> _____			<b>TOTAL LOCATIONS:</b> _____	<b>TOTAL AMOUNT:</b> \$ _____
<b>**Each Festival location requires a Health and Fire Permit. Please read attached information regarding permits**</b> <b>**No deep fat fryer allowed to be prepared in your Booth**</b>				
I hereby agree to abide by the rules and regulations of the festival and to comply with the regulations of the Contra Costa Health & Fire Department.				
Signature: _____			Date: _____	