



2009 KERMES CARNIVAL CHECKLIST

Name of Restaurant _____

Contact _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail address _____

Return Document Checklist:

- _____ 2009 SIGNED CARNIVAL APPLICATION
- _____ PAYMENT
- _____ MENU CHOICES
- _____ 2009 SIGNED WAIVER OF LIABILITY AND INDEMNITY AGREEMENT
- _____ COMPLETED AND SIGNED FIRE DEPARTMENT FORMS
- _____ COMPLETED AND SIGNED HEALTH DEPARTMENT FORMS
- _____ CA SELLERS PERMIT NUMBER
- _____ CERTIFICATE OF LIABILITY & ENDORSEMENT NAMING CITY OF PITTSBURG AND
YAHHAULICA CLUB AS ADDITIONAL INSURED
- _____ HEALTH DEPARTMENT EXEMPTIONS MUST SUBMIT DOCUMENTATION
- _____ SIGNED RULES AND REGULATIONS FORM

.....

I understand that all vendor booth fees are non-refundable. _____

(initial)