

Savannah Scottish Games 2017

Saturday - May 6, 2017 @ Bethesda Academy, Savannah GA

VENDOR APPLICATION & CONTRACT

Business _____ Contact _____
Cell () _____ Email _____
Address _____ City _____ State _____ Zip _____
Attendee's Name/Drivers Lic #/State _____
Products you sell _____
_____ Website _____

Do customers: Enter your booth? _____ Stand outside & view perimeter tables? _____ # of Games' Tix Needed _____

Electrical needed for: _____

120 Volt, 20 Amp, Minimum plug ins _____ 240 Volt, 20 Amp, Minimum plug ins _____

240 Volt, 30 Amp, Minimum plug ins _____ 240 Volt, 50/60 Amp, Minimum plug ins _____

*SSG will locate you close to electrical panels, however, we recommend you bring at least 100' of extension cords.

FEES: (Payable to *Savannah Scottish Games*)

Site 12x12 = \$250 or 20x20 = \$350 \$ _____

8' Table rental # _____ @ \$20 \$ _____

Chair rental # _____ @ \$5.00 \$ _____

TOTAL (to be submitted with this Application) \$ _____

To be considered as a Vendor, your package must consist of:

1. Complete and signed Application
2. Check for total amount due. Checks will not be deposited until approval of your application is complete.
3. Current/valid Certificate of Liability Insurance
4. Obtain Temporary Vendor Permit from Chatham Co Building Safety & Regulatory Mail to **Chatham County Building & Safety, P.O. Box 8161, Savannah, GA 31412**. You must obtain this permit to sell at our Games, obtaining this permit is your responsibility.
5. Mail package to Alistair Cairns, 3 Skidaway Village Square, Savannah, Georgia 31411.

- Priority will be given to last year's vendors, provided there were no issues with their conduct and/or business. New vendors will be considered in the order they are received as well as our needs for specific goods/wares.

- Setup will be Friday, May 5th from 9am – 6pm and Saturday, May 7th from 7am – 8:30am. All vehicles must be removed from festival area by 8:00am on Saturday.

- Food Vendors' sites must be inspected by the Chatham County Health Department in order to sell food.

- For vendors wishing to purchase ads in our full color program, information is under "Support the Games" on our website www.savannahscottishgames.com. Order & copy deadline is 3/25/17. As Vendors, you receive a business card advertisement for FREE. Send business card ad to mmccay45@comcast.net prior to the deadline.

The vendor noted above agrees to sell merchandise relevant to a Scottish/Celtic festival, as approved by Savannah Scottish Games, on the above date and location. The tent/booth location will be designated by SSG no later than during Setup on Friday, May 5, 2017. The event will take place rain or shine.

Liability Release: The Savannah Scottish Games does not accept any liability for you, your property, or any goods or provisions that you bring with you. While nighttime security will be provided on Friday night, you are responsible for securing and protecting your property. The undersigned vendor applicant hereby releases Savannah Scottish Games, Bethesda Academy and all of their employees, members, and volunteers from any and all liability arising from any loss or injury to vendor on, before, or after the dates above and waives any claim arising thereof.

Vendor Signature

Date

Chairman Approved

Space Assign

Any questions/concerns prior to the games can be sent to Savannahscottishgames.vendor@gmail.com



CHATHAM COUNTY

**DEPARTMENT OF BUILDING SAFETY
AND REGULATORY SERVICES**

P.O. Box 8161

Savannah, GA 31412-8161

912-201-4300 | Fax 912-201-4301

<http://buildingsafety.chathamcounty.org>

OCCUPATIONAL TAX DIVISION



Gregori S. Anderson, CBO
Director

Clifford Bascombe, CBO
Assistant Director

**O.C.G.A. § 50-36-1(E)(2) Affidavit Verifying Status
for County Public Benefit Application**

By executing this affidavit under oath, as an applicant for a Chatham County Georgia Business/Occupational Tax Certificate, Alcohol License, and Special Event as referred in O.C.G.A. § 50-36-1, from the Department of Building Safety and Regulatory Services, the undersigned applicant verifies *ONLY* one of the following with respect to my application for public benefit:

- 1) _____ I am a United States citizen: or;
- 2) _____ I am a legal permanent resident of the United States. or;
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

***My alien number issued by the Department of Homeland Security or other federal immigration agency is _____.**

***(A REQUIRED COPY OF ISSUED IDENTIFICATION NEEDED FOR APPROVAL, FRONT & BACK)**

The undersigned applicant also hereby verifies that he or she is 18 years or older and has provided at least one secure and verifiable document, as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can be classified as _____
(such as: state issued driver's license, state issued identification, passport, etc.)

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. §16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in _____ (City), _____ (State).

Signature of Applicant:

Date

Printed Name of Applicant

**SUBSCRIBED AND SWORN
BEFORE ME ON THIS**

____ DAY OF _____, 20____

My Commission Expires: _____

NOTARY PUBLIC

SEAL