

**APPLICATION  
FOR CONCESSION LOCATION  
2019 YORK FAIR  
SEPTEMBER 6 – 15, 2019**

DATE OF APPLICATION: \_\_\_\_\_ PRODUCT/SERVICE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

STREET ADDRESS/PO BOX #: \_\_\_\_\_ Email: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

COMPANY OWNER: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_ FAX NO.: \_\_\_\_\_  
(AREA CODE) (AREA CODE)

CELL PHONE NO.: \_\_\_\_\_ PA SALES TAX NO.: \_\_\_\_\_

SPACE REQUIRED AND USAGE:  INDOOR  OUTDOOR  GAS  ELECTRIC  WATER  
FRONT FOOTAGE \_\_\_\_\_ DEPTH \_\_\_\_\_

DESCRIBE IN DETAIL MERCHANDISE SERVICE:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DIRECT SELLING:  YES  NO

DESCRIPTION OF DISPLAY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU PREVIOUSLY PARTICIPATED IN THE YORK FAIR:  
 YES  NO

LIST OF FAIRS OR EXHIBITIONS IN WHICH YOU HAVE PARTICIPATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b><u>FOR OFFICE USE ONLY</u></b>	
Product: <input type="checkbox"/> Food <input type="checkbox"/> Mdse. <input type="checkbox"/> Display <input type="checkbox"/> Excl.	
Location – Code, Space # _____	
Road/Area/Bldg: _____	
Footage/Space Size: _____	
Footage Rental Amt. \$ _____	
Electric Hook-up \$ _____	
Insurance Deposit \$ _____	
Trailer Deposit \$ _____	
Total Contract Amt. \$ _____	
Initial Deposit Collected \$ _____	
Remaining Bal. Due \$ _____	

- \* **PLEASE INCLUDE PHOTO OF YOUR DISPLAY.**
- \* **IF YOU HAVE A TRAILER, HITCH MUST BE INCLUDED IN FRONTAGE.**
- \* **UTILITY HOOK-UPS AND USAGES ARE ADDITIONAL CHARGES, NATIONAL ELECTRICAL CODE COMPLIANCE.**
- \* **GOLF CARTS MUST DISPLAY A PERMIT AVAILABLE AT THE CONCESSIONS OFFICE.**
- \* **PUBLIC LIABILITY & PROPERTY DAMAGE INSURANCE WITH LIMITS OF \$1,000,000 PER OCCURRENCE FOR BODILY INJURY, PROPERTY DAMAGE AND PRODUCTS COVERAGE IS REQUIRED AND MUST BE INCLUDED. THE YORK CO. AG. SOC. MUST BE NAMED ON THE INSURANCE CERTIFICATE AS ADD'L INSURED.**
- \* **COMPLETING THIS APPLICATION DOES NOT GUARANTEE YOU A LOCATION AT THE YORK FAIR.**

MAIL TO: CONCESSIONS COORDINATOR  
YORK FAIR  
334 CARLISLE AVE.  
YORK, PA 17404-3204

\_\_\_\_\_  
Received By

PHONE: 717-848-2596 EXT. 139 or 117 FAX: 717-845-1718 EMAIL: mflory.concessions@yorkfair.org