



Vendor Application 2017 Argyle Night Market

Every Thursday, 5:00pm – 9:00pm
July 6th – August 31st

ExploreUptown.org

APPLICANT INFORMATION

Business Name: _____

Do you have an existing storefront business? Yes No

Address: _____ City: _____ State: _____ Zip: _____

Primary Contact Name: _____ Phone: _____

Email: _____

Booth Contact Name: _____ Day-of Phone: _____
 Same as Primary Contact Same as Primary Contact

Email: _____
 Same as Primary Contact

Business Website: _____

Social Media Accounts: _____

PRODUCTS

I am offering: Food/Produce Art Merchandise Services

List items or services to be sold, displayed, or promoted:

SCHEDULE

I commit to selling at the 2017 Argyle Night Market on the following dates (check all that apply):

- July 6 July 13 July 20 July 27
 August 3 August 10 August 17 August 24 August 31

VENDOR SPACE FEES

Vendor Fee includes a 10' x 10' space size.

Rate	Food, Restaurant, Farmer, or Artist	Merchandise or Service Retailer
Early Bird Special (9 weeks) Must submit payment in full by Friday, April 21	<input type="checkbox"/> \$250 for season	<input type="checkbox"/> \$350 for season
Full Season Discount (9 weeks) Must submit payment in full by Thursday, June 22	<input type="checkbox"/> \$285 for season	<input type="checkbox"/> \$405 for season
Weekly Commitment Must submit payment 1 week prior to vending date	<input type="checkbox"/> \$40 per week	<input type="checkbox"/> \$50 per week
Tent Rental Limited quantity available—first come, first serve	<input type="checkbox"/> \$50 per week	<input type="checkbox"/> \$50 per week

*ASK ABOUT OUR FARMER DISCOUNT!

TOTAL SPACE FEE: \$ _____

SUBMITTING PAYMENT

- Check or Money Order** Payable to: Uptown United
Mail to: Uptown United
4753 North Broadway, Suite 822
Chicago, Illinois 60640-4992
- Cash/Credit Card** Invoice – Payable on site, in person
Manual – Payable by phone or on site

SUBMITTING APPLICATION

Please submit Vendor Application and Vendor Required Materials Checklist, along with supporting documents, to:

Greg Carroll, Director of Partnerships & Events
greg@uptownbusinesspartners.com
773-878-1184

Mail/drop off at:
Uptown United
4753 North Broadway, Suite 822
Chicago, Illinois 60640-4992

By signing this document, I attest to its accuracy and commit to selling the described product(s) and/or service(s) at the 2017 Argyle Night Market, on the above indicated Thursdays between July 6 and August 31. I understand that I will be responsible for providing my own table, chairs, tent and any other set up needs, and for setting up and taking down my booth. Market organizers may use the name and images of my business for promotional purposes, and I agree to use my marketing channels, including website and social media, to promote the event.

Signature _____

Date _____

VENDOR REQUIRED MATERIALS CHECKLIST

- COMPLETED VENDOR APPLICATION and PAYMENT IN FULL FOR ALL FEES*
Including complete applicant information, space fee, payment, & signed contract

Food Vendor Materials

- CERTIFICATE OF INSURANCE*
Food vendor MUST have general liability insurance listing additionally insured:
City of Chicago and Uptown United
- AND**
- CURRENT HEALTH DEPARTMENT KITCHEN INSPECTION COPY (completed within the last 6 months)*
- *Food Vendor must have current health inspection of the kitchen listed on the City application where food is being prepared / prepped for the Night Market*
 - *If Vendor is not the business owner listed on the above licensed kitchen health inspection, a signed affidavit from the owner of the licensed kitchen indicating permission of use to the vendor for the festival must also be submitted.*

IF PREPARING FOOD ON-SITE

- OUTDOOR FOOD SANITATION CERTIFICATION (completed within the last 6 months)*
Please contact Uptown United for more details about attending the course.
Certification Number: _____
- OR**
- MOBILE FOOD LICENSE COPY*
Mobile Food License Number: _____ Expiration Date: _____

AND EITHER

- COMPLETED TEMPORARY FOOD VENDOR LICENSE APPLICATION*
Form must be completed 20 calendar days prior to the event
- OR**
- COMPLETED 180-DAY MULTI-EVENT TEMPORARY FOOD VENDOR LICENSE APP*

Retail/Service Vendor Materials

- ILLINOIS BUSINESS TAX NUMBER: _____*
To obtain an IBT # call 217-785-3707 or visit www.mytaxillinois.gov
- OR**
- ITINERANT MERCHANT LICENSE*
Form must be completed 10 calendar days prior to the event