



## CONCESSION VENDOR PERMIT APPLICATION APPLICANT INFORMATION

Business Owner Name (first, middle, last):

Business Name:

E-Mail address:

Current mailing address:

City:

State:

ZIP Code:

Phone Number:

Fax #:

Cell #:

### VENDING INFORMATION

List proposed vending location (attach aerial map or diagram):

Provide description of product(s) or services to be sold:

Provide description of equipment to be used (mobile cart, stand, exercise equipment, etc.) and attach a current color photograph:

How long have you been in business under your current name:

What day(s) and time(s) do you plan on selling your merchandise or providing your service?

### REFERENCES

Name

Address

Phone



## CONCESSION VENDOR PERMIT APPLICATION

### Rules and Regulations

- ◆ Submitting an application does not guarantee approval. Applications will be reviewed and a determination made within two (2) weeks of receipt.
- ◆ You are required to hold all licenses/permits necessary from the municipality in which you will be vending or providing services. If your request is approved you will be required to provide the license prior to a vending permit being issued.
- ◆ We do not provide any use of county utilities for food preparation or equipment storage.
- ◆ Ancillary equipment located in the parks is to be used for its intended purpose. You may not utilize picnic shelter beams/rafters for any reason. Picnic tables cannot be moved or used as a form of exercise equipment. Weights cannot be set on picnic tables or thrown on the shelter floor.
- ◆ Cart/stand/equipment may not be stored on site and must be removed daily.
- ◆ This permit does not allow mobile vending. You must remain in the assigned area.
- ◆ All beverage products sold on county property must be Pepsi products per the County's contract with Pepsi Bottling Group. There are no exceptions to this rule. If you are found to be in violation of this rule, your permit will be canceled.
- ◆ You must have your permit with you at all times while on County property.
- ◆ You must notify us immediately if there are changes to the information provided on the application.
- ◆ If approved, vendor fees are \$150.00 a month plus sales tax of \$10.50. Fees are due the first of each month you wish to vend or provide services. Fee can be prorated for the first month of service. Payments cannot be made more than 6 months in advance.
- ◆ Payment locations and forms of payments accepted:  
Payment/Mail Location: Parks and Conservation Resources Administrative Office  
12520 Ulmerton Road  
Largo, FL 33774
  - Cash – Administrative Office
  - Checks and Money Orders – Accepted by mail or in person. If check is returned by bank for non-payment, dishonored check rates will apply and vary from \$30 to 5% of face value of the check. Future payments must be made with cash.
  - Credit Cards - pay by MasterCard or Visa. You can call 582-2100 and select 2 from the phone menu and we can take your credit card payment over the phone or payments can be accepted on site at the administrative office.
- ◆ The County reserves the right to void the permit at any time. Failure to obey all rules and regulations will be a cause for cancellation.

### Include with your application:

- ◆ Provide a current color photograph of the equipment being used.
- ◆ Provide a listing of products/services and pricing.
- ◆ Provide location request with aerial map or diagram.



## CONCESSION VENDOR PERMIT APPLICATION

The following insurance requirements are included in this Agreement:

The Lessee shall obtain and maintain at all times during its performance of the Agreement, insurance of the types and in the amounts set forth. All insurance policies shall be from responsible companies duly authorized to do business in the State of Florida and have an AM Best rating of A- VIII or better. Within ten (10) calendar days of executed Agreement, the Lessee shall provide the Lessor with properly executed and approved Certificates of Insurance to evidence compliance with the insurance requirements of the agreement. The Certificate(s) of Insurance shall be signed by authorized representatives of the insurance companies shown on the Certificate(s). A copy of the endorsement(s) referenced in paragraph three (3) for Additional Insured shall be attached to the certificate(s).

No occupancy shall commence at any site unless and until the required Certificate(s) of Insurance are received and approved by the Lessor. Approval by the Lessor of any Certificate of Insurance does not constitute verification by the Lessor that the insurance requirements have been satisfied or that the insurance policy shown on the Certificate of Insurance is in compliance with the requirements of the Agreement. Lessor reserves the right to require a certified copy of the entire insurance policy, including endorsements, at any time during the Agreement period.

All policies providing liability coverage(s), other than Professional Liability and Worker's Compensation policies, obtained by the Lessee to meet the requirements of the Agreement **shall be endorsed to include Pinellas County, a political subdivision of the State of Florida as an Additional Insured.**

If any insurance provided pursuant to the Agreement expires prior to the expiration of the Agreement, renewal Certificates of Insurance and endorsements shall be furnished by the Lessee to the Lessor at least thirty (30) days prior to the expiration date.

Lessee shall also notify Lessor within twenty-four (24) hours after receipt, of any notices of expiration, cancellation, nonrenewal, or adverse material change in coverage received by said Lessee from its insurer. Notice shall be given by certified mail to: Pinellas County Parks & Conservation Resources, 12520 Ulmerton Road, Largo, FL. 33774, and nothing contained herein shall absolve Lessee of this requirement to provide notice.

Should the Lessee, at any time, not maintain the insurance coverages required herein, the Lessor may terminate the Agreement, or at its sole discretion may purchase such coverages necessary for the protection of the Lessor and charge the Lessee for such purchase. The Lessor shall be under no obligation to purchase such insurance, nor shall it be responsible for the coverages purchased or the insurance company or companies used. The decision of the Lessor to purchase such insurance shall in no way be construed to be a waiver of any of its rights under the Agreement.

Each insurance policy shall include the following terms and/or conditions in the policy:

- (1) The Named Insured on the Certificate of Insurance must match the entity's name that is signing the Agreement.
- (2) Companies issuing the insurance policy, or policies, shall have no recourse against Lessor for payment of premiums or assessments for any deductibles that all are at the sole responsibility and risk of Lessee.
- (3) The term "Lessor", "County", or "Pinellas County" shall include all Authorities, Boards, Bureaus, Commissions, Divisions, Departments and Constitutional offices of County and individual members, employees thereof in their official capacities, and/or while acting on behalf of Pinellas County.
- (4) The policy clause "Other Insurance" shall not apply to any insurance coverage currently held by Lessor or any such future coverage, or to Lessor's Self-Insured Retentions of whatever nature.
- (5) All policies shall be written on a primary, non-contributory basis.
- (6) Any certificate of insurance evidencing coverage provided by a leasing company for either Workers Compensation or Commercial General Liability shall have a list of covered employees certified by the leasing company attached to the Certificate of Insurance. The Lessor shall have the right, but not the obligation to determine that the Lessee is only using employees named on such list to perform work for the Lessor. Should employees not named be utilized by Lessee, the Lessor, at its option may stop work without penalty to the Lessor until proof of coverage or removal of the employee by the Lessee occurs, or alternatively find the Lessee to be in default and take such other protective measures as necessary.
- (7) Insurance policies, other than Professional Liability, shall include waivers of subrogation in favor of Pinellas County from the Lessee.



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The insurance requirements for this Agreement, which shall remain in effect throughout its duration, are as follows:

(A) Workers' Compensation Insurance

Limit	Florida Statutory
Employers Liability Limits	
Per Employee	\$ 500,000
Per Employee Disease	\$ 500,000
Policy Limit Disease	\$ 500,000

(B) Commercial General Liability Insurance including, but not limited to, Independent Contractor, Contractual Liability Premises/Operations, Products/Completed Operation and Personal Injury.

Limits	
General Aggregate	\$ 2,000,000
Products/Completed Operations Aggregate	\$ 1,000,000
Personal Injury and Advertising Injury	\$ 1,000,000
Fire Legal Liability	\$ 300,000
Each Occurrence	\$ 1,000,000

(C) Business Automobile or Trucker's/Garage Liability Insurance covering owned, hired and non-owned vehicles. Coverage shall be on an "occurrence" basis, such insurance to include coverage for loading and unloading hazards, unless Contractor can show that this coverage exists under the Commercial General Liability policy.

Limit	
Per Accident	\$ 1,000,000

(D) Property Insurance Contractor will be responsible for all damage to its own property, equipment, and/or materials.

Per Accident	\$ 1,000,000
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If you or your insurance agent has any questions about these requirements contact Pinellas County Risk Management at 727-464-3664.



## CONCESSION VENDOR PERMIT APPLICATION

### SIGNATURE(S)

I verify that all information provided is true to the best of my knowledge.

Signature of applicant:

\_\_\_\_\_

Date: \_\_\_\_\_

Signature of owner (if not  
applicant): \_\_\_\_\_

Date: \_\_\_\_\_

### Administrative Use Only

Date received: \_\_\_\_\_

Approved   Denied

Comment:

\_\_\_\_\_

Mgr Signature:

\_\_\_\_\_

Director Signature:

\_\_\_\_\_

Permit Number:

\_\_\_\_\_