Morris County Park Commission: Vendor/Exhibitor Application

*All documents must be submitted with this form **no later** than 2 weeks prior to the rental date.*

Return to: Morris County Park Commission Attn: Event Committee,
P.O. Box 1295, Morristown, NJ 07962-1295 OR events@morrisparks.net

Vendor/Business Name: _____

Type of Vendor *check the appropriate box* ☐Merchandise ☐Rental Service (Tents/Chairs) ☐Exhibitor
☐Entertainment ☐Videographer/Photographer ☐Timing Services ☐Physical Trainer
☐Food/Beverage (☐Caterer ☐Food/Bev. Truck ☐Food/Bev. trailer ☐Food/Bev. served from a tent)
☐Other: _____

Vendor Contact: _____ **Date**: _____

Address: _____

Town: _____ **State**: _____ **Zip Code**: _____ **Phone**: _____

Cell Phone: _____ **Email**: _____

Event Information: Vendors may only be on site when contracted for a Renal or Event permitted on MCPC Property. The Vendor Application and supporting documents must be submitted and approved to received MCPC Vendor Permit. Submitting this form does not guarantee approval or a permit, MCPC representative will contact you to verify.

Name of Event: _____ Location (Park): _____

Date(s): _____ Est. Attendance: _____ Service Provided: _____

Does the Vendor plan to collect money onsite? ☐**Yes** (Permit Fee Required) ☐**No**

Permit Fee - $35 per day ($10 administrative fee added for late applications received within 10 days of the requested date.)
Cancellation - If the vendor permit is no longer needed, permit fees will be refunded minus a $10 administrative fee.
Late Applications - If the vendor permit is no longer needed, permit fees will be refunded minus a $20 administrative fee.

If providing **Food/Beverage** indicate if it is: ☐ **Pre-Packaged** ☐ **Prepared On Site**

Food Vendors are required to comply with all state and local health requirements. Initial the statement below.
_____ I understand local and state health requirements must be followed and will comply with all regulations.

Is **Beer/Liquor** being served at the Event or Rental? ☐ **Yes** ☐ **No** ☐ **Unknown**

If yes, indicate if you are**:** ☐ **Providing Beer/Liquor** ☐ **Serving Beer/Liquor** ☐ **Not working with beer/liquor**

Will the Vendor be using or providing an open flame? ☐**Yes (Type: _____)** ☐**No**

Will the Vendor bring a generator? ☐**Yes** ☐**No**

Will the Vendor be bringing a tent? ☐**Yes (Size: _____)** ☐**No**

Insurance Requirements, Fire Marshal, Health Department and Liquor information provided on page 2 -3.

Morris County Park Commission Indemnification:

The Contractor/Vendor/Supplier whose name and signature appear below hereby agrees to indemnify, defend, hold and save the Morris County Park Commission, the County of Morris and the Morris County Board of County Commissioners, including their officials, officers, directors, employees, agents, professionals and volunteers (collectively "Morris County") harmless from and against any and all claims, losses, penalties, damages, settlement, costs, charges, professional fees (including attorney's fees and related costs) and all other expenses or liabilities of any nature whatsoever including, without limitation, the investigation and defense of any claims, arising out of or related to the provision of any goods, services or consumables by the Contractor/Vendor/Supplier or the operation of any business or trade by Contractor/Vendor/Supplier or any operations conducted thereby, including, without limitation, claims for damage, or loss that is attributable to bodily injury, sickness, disease or death, or to injury or to destruction of tangible property, including the loss of use resulting therefrom, and is caused in whole or in part by any act or omission of the Contractor/ Vendor /Supplier, or their sub-contractors, exhibitors, other vendors or anyone directly or indirectly employed or affiliated in any manner with Contractor /Vendor/Supplier or anyone for whose acts Contractor/Vendor/Supplier may be liable (including a claim by an employee of the Contractor /Vendor/Supplier or their sub-contractors, exhibitors or other vendors), regardless of whether any such damage or loss is attributable in part to a party indemnified hereunder. This agreement also applies to all volunteers of the Contractor/Vendor/Supplier.

The Contractor/Vendor/Supplier agrees to add and schedule the County of Morris as additional insured on a primary, noncontributory basis for general liability, automobile liability (when applicable) and excess liability (when required), with a waiver of subrogation on all policies in favor of the County of Morris. The Contractor/Vendor/Supplier shall provide proof of insurance coverages to the Morris County Park Commission prior to commencing any operations.

By signing below, you are agreeing to the terms of the Morris County Park Commission Indemnification, the terms of the Vendor/Exhibitor Application, and to follow all of the rules, regulations and policies while on MCPC property.

_____ _____

Print Name / Title Signature

enjoy the experience

morris county park commission

Morris County Park Commission

Insurance Information

Return to: Attn: Recreation Department
P.O. Box 1295
Morristown, NJ 07962-1295

973.326.7616
Events@morrisparks.net

VENDOR INFORMATION:

Insurance Requirements, Fire Marshal, Health Department and Liquor information provided below.

1. Certificate of Insurance

- **General Liability Insurance*** - $1 Million Each Occurrence, $2 Million Aggregate
- **Business Auto*** - $1 Million Each Accident
- **Workers Compensation** - Proof of Workers Comp.

  Each Accident $500,000/Disease each employee $500,000/Disease Policy Limit $500,000

  ***Morris County Park Commission and the County of Morris named as Additional Insured**

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 2/27/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
Insurance Agency	PHONE (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURED	**INSURER(S) AFFORDING COVERAGE**	**NAIC #**
Rental Group Information	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES — CERTIFICATE NUMBER: — REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	
		X		POLICY NUMBER	5/1/2018	5/1/2019	MED EXP (Any one person)	
							PERSONAL & ADV INJURY	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$2,000,000
	POLICY PROJECT LOC						PRODUCTS-COMP/OP AGG	
	OTHER:						LEGAL LIAB TO PARTICIPANTS	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea Accident)	$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS			POLICY NUMBER	5/1/2018	5/1/2019	BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	
	DED RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABLITY Y / N						PER STATUTE OTHER	
	ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A		POLICY NUMBER	5/1/2018	5/1/2019	E.L. EACH ACCIDENT	$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE – EA EMPLOYEE	$ 500,000
							E.L. DISEASE – POLICY LIMIT	$ 500,000
	MEDICAL PAYMENTS FOR PARTICIPANTS						EXCESS MEDICAL	
								$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is Additional Insured as required by written contract or agreement.

CERTIFICATE HOLDER	CANCELLATION
Morris County Park Commission The County of Morris PO Box 1295 Morristown, NJ 07962-1295	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE SIGNATURE

ACORD 25 (2016/03)

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General Liability Insurance*
$1 Million Each Occurrence
$2 Million Aggregate

Business Auto
$1 Million Each Accident
Don't have a business vehicle? See #3

Workers Compensation
Each Accident $500,000
Disease each employee $500,000
Disease Policy Limit $500,000
Don't have worker's comp? See #3

Must be listed as Certificate Holder:
Morris County Park Commission
The County of Morris
PO Box 1295
Morristown, NJ 07962-1295

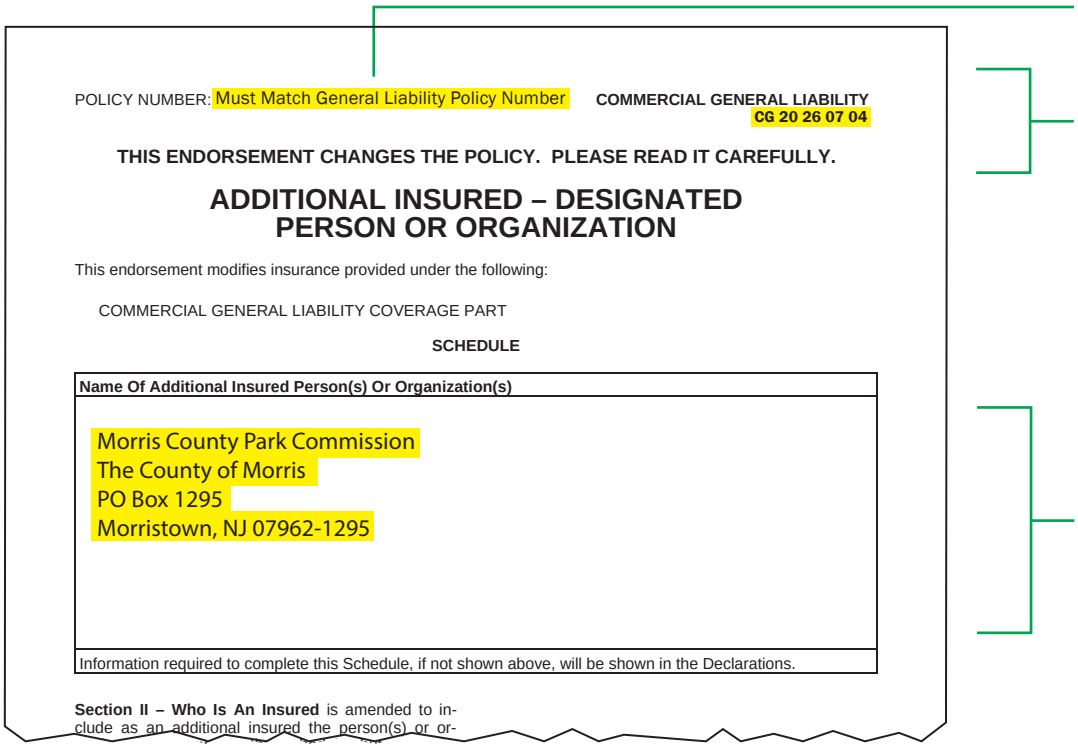
NOTE: Vendors who provide and/or serve alcohol require Liquor Liability Coverage.

Liquor Liability (if required) - $1 Million Each Claim, $1 Million Aggregate.

2. Endorsement Form - **Required** for **Food/Bev. Vendor, Liquor Vendors** and **all vendors on site more than one day per year.**

Named Endorsement* - CG 20 10, CG 2026 or the Equivalent

*Morris County Park Commission and the County of Morris named as Additional Insured



POLICY NUMBER: Must Match General Liability Policy Number COMMERCIAL GENERAL LIABILITY CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
Morris County Park Commission The County of Morris PO Box 1295 Morristown, NJ 07962-1295
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or or-

Policy Number
Must match the Gernal Liability Policy Number

Endorsement Type:
CG 20 26
CG 20 10

Additional Insured Must State:
Morris County Park Commission
The County of Morris
PO Box 1295
Morristown, NJ 07962-1295

3. Additional Information

Don't have a Business Vehicle?

Auto Coverage - Complete only if vendor is not brining a Commercial Vehicle or Trailer on site.

Provide the Name of the Car Insurance Company and the last 4 digits from a personal policy.

Insurance Company: _____ **Last 4 Digits of Policy #:**_____ **Expiration:** _____

Don't carry Worker's Compensation?

Download the following forms on **www.morrisparks.net/insurance**

1. **Self-Employed Certificate** - Complete only if renter is Self-Employed and not required to carry Workers Comp.
2. **Unincorporated Entity Certificate** - Complete only if renter uses volunteers, does not have employees, and is not required to carry Workers Comp.

Fire Marshal Information:

Cooking on site, using a tent larger that a 10'x10' pop-up or placing small tents side by side requires permits from the Morris County Fire Marshal.

REQUEST a Cooking, Food Truck or Tent Permit Application (events@morrisparks.net)

Health Department Information:

Food Vendors are required to comply with all state and local health requirements.

CONTACT the local Health Department for the location you will be at.

Liquor License:

Any vendor serving alcohol must have proper NJ ABC licensing and provide a copy of the license.