RADNOR TOWNSHIP RECREATION AND COMMUNITY PROGRAMMING DEPARTMENT



WHEELS OF WAYNE



SUNDAY, APRIL 26, 2020 Rain Date: Sunday, May 3, 2020

12:30 to 3:30 PM

All vendors welcome - food, products, services, and more!

This Car & Motorcycle show will take place in Downtown Wayne!
This event includes live entertainment, food, and more for the whole family!

Official Vendor Application

*FOOD VENDORS: \$150.00 • OTHER VENDORS: \$50.00

*Food vendors participating in either the Pulled Pork or the Pizza Contests will receive a discount - cost will be \$50 instead of \$150!

**All vendors will get a 10x10 space. **unless negotiated otherwise

(Food Vendors must complete this form AND required Temporary Food Vendor Application)

Space is limited to a first come, first served basis; vendors are subject to placement on North Wayne OR West Avenues. Checks should be made payable to Radnor Township. Registrations will be taken until we have reached maximum capacity. All details are subject to change.

Contact the Recreation Department (610-688-5600) for opportunities to waive the vendor fee!

Business Name			Type of Business	
			Phone	
Business Address				
City	State	Zip	Phone	
Website			Fax	
Product(s):				
Please check off any boxes	s below that	apply to yo	our set-up on the day of the event:	
☐ I have my own table	pop-up tent e/chairs for t	the event	☐ I require a footprint larger than 10 x 10 ted down) ☐ I would prefer to be on West Avenue ☐ Other:	
	•	•	our Pulled Pork or Pizza Contests? Pork Pizza	
participation in this event. I certify that I am involve a risk and the possibility of injury, disc	in good health and ar ability and/or death.	m able to attend an	e in all aspects of the above event, and I understand and assume all of the risks of my d participate in this program/trip and I hereby acknowledge that my participation may	
In consideration of the being permitted to pa discharge, indemnify, and hold harmless Rad heirs, executors, administrators, assigns, frou whatsoever, which I or my legal representative reason of any loss resulting from personal inj program/trip.	rticipate in the above nor Township and its m any and all manner ve may have or may a ury or damage to any	e event, I hereby, fo successors and assi r of actions, causes acquire against Radi r personal property	r myself, my heirs, executors, administrators, and assigns forever remise, release, igns, directors, officers, members, agents and representatives and employees, and their of action, suits, debts, accounts, controversies, damages, claims and demands nor Township or its directors, officers, members, agents, or other representatives, by belonging to me, which may occur during or by reason of my participation in this	
I agree that Radnor Township shall have the these rules of conduct, or for actions or cond	right at its discretion tuct detrimental to or	to enforce establish incompatible with	ned rules of conduct and/or terminate my participation in this event for failure to follow the welfare, comfort, harmony or interest of the event as a whole.	
I hereby grant Radnor Township and any of it warranted regarding my health and safety, as	s directors, officers, r nd I fully release all of	members, agents, a f them from any lial	nd other representatives, full authority to take whatever action they consider to be bility for such actions taken on my behalf.	
Signature			Date	
www.radnor.com Please return com	ipietea Jorm & pa	iyment to: kadn	or Township Recreation, 301 Iven Ave. Wayne, PA 19087 610-688-5600	

RADNOR TOWNSHIP COMMUNITY DEVELOPMENT DEPARTMENT TEMPORARY EVENT APPLICATION "PLEASE PRINT"

*** A FILLED-OUT APPLICATION MUST BE SUBMITTED TO THE COMMUNITY DEVELOPMENT DEPARTMENT TWO (2)
WEEKS PRIOR TO THE EVENT FOR REVIEW. APPLICANTS NOT HAVING SUBMITTED THEIR APPLICATION ON TIME
OR NOT FILLED OUT MAY NOT BE APPROVED TO PARTICIPATE. ***

OR NOT FILLED OUT MAT NOT I	SE APPROVED TO PARTIC	JIPATE, """		
Applicant Name:		Phone: *		
*		e-mail: *		
		Fax: *		
Facility Name:				
racinty marrie.				
Location of event:				
Commissary Information: Name, address and Phone numl	nor .			
*	JCI.			
Vendor Coordinator on day of Event:		Phone:*		
*				
Date(s) of Event: *				
Date(3) of Event.				
Hours of Event:*				
Hours of Event:*				
Name of Certified Food Safety Professional that will be on	site the day of the	Phone:*		
event?				
*				
Catherin Times	Dural Davin Times			
Set up Time:	Break Down Time:			
Will food be cooked off site:* Yes or No (ci	rcle one)			
Where will food be prepared and cooked?				
*				
	ad Faada			
	ed Foods			
What method of heating source will be used to maintain H	lot holding temperatures	@ 135 degrees or more?		
*				
What method of cooling source will be used to maintain C	old holding temperatures	@ 41 degrees or less?		
*				

Uncooked Foods
How will food(s) be protected during event?
How will foods be displayed:
Temporary Event Application Page 2
Method of washing utensils:
Source of Potable Water: *
Source of Ice:
*
How and where will food handlers wash their hands:
How will left over foods be disposed of:
Where will the location be and how many restroom facility's will be provided:
*
Where and how will patrons wash their hands?
*
How will garbage be disposed of both liquid and solid:

Provide list of menu items served (attach additional sheets if needed): ***					
****	<u>IM</u>	IPORTANT NOTICE	***		
Vendors not licen documents: 1. Current Food License	sed by Radno	or Township must prov	vide all of the following		
2. Most Recent Inspection 3. Commissary License 4. Most Recent Inspection 5. Food Protection Manag	• Report of your	•			
 Food thermometer should be on site. Hand wash station on site with hot water. Approved sanitizer on site. No Bare Hand Contact with Ready to Eat Food. Each vendor should have an approved method of serving RTE foods, such as; gloves, tongs, spatulas, deli paper or other method approved by health officer. Trash containers must be located at each vendor stand and trash disposed of in accordance with 					
Radnor Township Ord		acii vendoi stand and d'asii	disposed of ill accordance with		
Signature of applicant: *					
Do not wr	ite below this li	ne. To be completed by Rac	lnor Township Staff		
Application Received:	Fee Paid:	Application Approved:	Denied:		
Signature of Health Officer:					
Comments:					

Menu of Foods Served
Sketch of Temporary Stand(s)
<u>Sketen or remporary Stana(s)</u>

To: Coordinator of Special Events

From: Health Officer

Re: Temporary Event with Food Vendors

To have your temporary event run smoothly and to minimize the possibility of FOODBORNE ILLNESS OR OUTBREAK please submit the following information with your completed Temporary Event Applications. Please contact me at 610-688-5600 ext. 167 if you have any questions.

Attached you will find:

- 1) The coordinator's list of **ALL** food vendors participating, each food/beverage item being offered. This list should be prepared by **THE COORDINATOR** and submitted to this office at least **two weeks** before the event.
- 2) Accompanying the list of food vendors you must submit a drawing of the layout of the event designating where each food booth with be stationed.
- 3) Each Food Vendor is required to submit the following items with their application: Current Food License, Most Recent Inspection Report for your truck or facility, most recent Inspection Report for your Commissary, Current Commissary License, Food Safety Manager Certification, Menu, and sketch of the of stand.
- The temporary event application, which shall be filled out by each food/beverage vendor at least **two weeks** before the event. A **\$125.00 fee** must accompany each vendor's application. Turn in completed Temporary Event Applications to the Event Coordinator along with the fee. The Event Coordinator will submit all applications to the Health Officer for processing.
- 5) A **\$250.00** Special Event Sponsor Fee is required two weeks prior to the event.

Coordinator's list of All Food Vendor's