Amount Paid	
Date	
Receipt No	
Received by:	

CITY OF CASHMERE 101 WOODRING STREET CASHMERE, WASHINGTON 98815 PHONE: (509) 782-3513 FAX: (509) 782-2840

Application for Multiple-Vendor Event Permit

SPONSORING AGENCY			
CONTACT	PHONE		
ADDRESS			
CITY	STATE	ZIP	
TIME PERIOD	through		
TYPE OF EVENT			
TYPE OF MERCHANDISE SOLD			
NO. VENDOR BOOTHS			
LOCATION			

REQUIRED INSURANCE CERTIFICATE-An insurance certificate in the amount of \$1,000,000, naming the City of Cashmere as an additional insured is required.

✤ PLEASE ATTACH A DRAWING OR PICTURE OF THE BOOTHS WITH DETAILED DESCRIPTION OF THE DIMENSIONS AND MATERIALS USED IN CONSTRUCTION, AND A LIST OF VENDORS.

HOLD-HARMLESS AGREEMENT – The applicant organization or entity obtaining this permit agrees to defend, indemnify and hold harmless the City of Cashmere, its agents, employees and officials from all causes of action, demands and claims, including costs of defense, arising out of the acts or omissions of the applicant organization, its employees, representatives, concessionaires and persons for whose acts or omissions it is liable.

I understand that for any permit resulting from this application to remain valid, I must comply with all State of Washington, Chelan County, and City of Cashmere regulations; and that if my location at the park is unused for two (2) consecutive weeks the permit may be forfeit.

Signature

Date

Approval signature

Date