



# 4<sup>th</sup> of July Fireworks and Freedom Celebration

## Thursday, July 4, 2019

### Food Vendor Application

Food Vendor space is available outside on the Fairgrounds and parking lot of the Longview Exhibit Building. Food Vendors must supply their own cooking/food trailer, equipment, tents, tables, and chairs, etc. Spots are limited so please return your application as soon as possible.

- Food Vendor fee is \$150.00 per unit. Please make check payable to City of Longview and return to either address listed below, along with your completed application.
- A Health Department Temporary Event Permit is **MANDATORY**. For further information about the Health Permit, call 903-237-2761. Food not approved cannot be served. No home preparation or storage is allowed.
- Temporary Health Permit fees must be paid directly to the Environmental Health Division and are non-refundable. Please return the completed Health Permit Application and fee to the address on their application.
- Set-up hours are 8:00 a.m. – 8:00 p.m. on the 3<sup>rd</sup> and tear-down is 10:00 p.m. – midnight on Thursday, July 4<sup>th</sup>.
- Final Health Department inspections will be scheduled at approximately 9:00 a.m. on Thursday, July 4<sup>th</sup> unless you make other arrangements prior to the event directly with the Health Department.
- As part of the City of Longview’s green initiative, Styrofoam containers are strongly discouraged.
- A certificate of Insurance naming the City of Longview as co-insured is **MANDATORY** and should be returned to our office with your completed Food Vendor Application, or no later than one week prior the festival.
- Vendors are responsible for Sales Tax ID numbers and reporting to the State. Please supply your # below.
- Festival hours are 11:00 a.m. – 9:30 p.m., at which time the fireworks show will start, and last 30 minutes.
- No outside coolers will be allowed for the general public.

Business Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ /Email: \_\_\_\_\_

Texas Sales Tax ID # \_\_\_\_\_

What do you plan to sell? \_\_\_\_\_

Amount enclosed: \_\_\_\_\_ Amount of space required: \_\_\_\_\_

Estimated ice requirement: \_\_\_\_\_ Electrical requirements: \_\_\_\_\_

*Ice will be available at market cost and will be delivered to your vending space until 6:00pm. After 6:00 you will need to get ice from trailer.*

\_\_\_\_\_ I am unable to attend this year, but please keep my name on the mailing list for future shows

\_\_\_\_\_ Please remove my name from your mailing list

**Please mail check and completed form to either address listed below:**

City of Longview • Maude Cobb Convention and Activity Complex • 903-237-1230 • FAX: 903-236-7845  
PO Box 1952, Longview, TX 75606 • 100 Grand Blvd., Longview, TX 75604  
aoetken@longviewtexas.gov • www.LongviewTexas.gov/Fireworks



## Waiver

In this form, the word "Organization" means the following, both individually and collectively: (a) all sponsors of the 4<sup>th</sup> of July Fireworks and Freedom Celebration; (b) the City of Longview; and (c) the City of Longview's officers, employees and volunteers.

I release the Organization from any and all liability for any claims, demands, loss, damage, or expense arising from the negligent acts or omissions of the Organization relating to the July 4<sup>th</sup> Fireworks and Freedom Celebration.

I give permission to the Organization to record, reproduce, broadcast, telecast, and otherwise use, display or disseminate any occurrences during the 4<sup>th</sup> of July Fireworks and Freedom Celebration or its preparation. My permission extends to any form of recording, reproduction or dissemination, whether by means of visual media, aural media or any combination of visual and aural media. I understand and agree that the Organization may allow any other person or entity to record, reproduce, broadcast, telecast, or otherwise use, display or disseminate such information. I also understand and agree that I will receive no compensation.

I am signing this form on behalf of myself and/or on behalf of the business that I represent, whether that business is a sole proprietorship, a partnership of any kind or an incorporated entity. If applicable, I have authority to sign this form on behalf of the business that I represent, and this form is binding on that business entity and on me as an individual.

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Signed

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Date



**TEMPORARY EVENT APPLICATION**  
 City of Longview – Environmental Health Division  
 410 S. High St.  
 Mailing Address: P.O. Box 1952, Longview, TX. 75606  
 Phone: 903 237-1285 Fax: 903 237-1289

Date(s) Event \_\_\_\_\_ Location: \_\_\_\_\_

Time Food will be set up: \_\_\_\_\_ Name of Concession: \_\_\_\_\_

Applicant's Name and Address: \_\_\_\_\_

Applicant's Phone # \_\_\_\_\_ Event Sponsor/Organizaiton: \_\_\_\_\_

List all proposed food items to be served:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Restaurant/Store/Source food will come from:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TEMPORARY EVENT fees - \$50 for 1-3 days, plus \$5 for each additional day**  
**FEES MAY BE PAID BY CASH, CHECK, M.O., VISA OR M/C**  
*ALL FEES ARE NON-REFUNDABLE*

OFFICE USE ONLY IN BOX

- Permit Required
- Non-Profit – No Fee Required
- Permitted Caterer – No Fee Required
- No Permit Required

Amount Paid \$ \_\_\_\_\_  
 Received by \_\_\_\_\_  
 Check/MO \_\_\_\_\_  
 Visa or M/C # \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_ / \_\_\_\_\_

**Temporary Event Permit-City of Longview, Texas**

Event \_\_\_\_\_  
 Location \_\_\_\_\_  
 Name of Concession \_\_\_\_\_  
 Permit Valid Only on the Following Date(s) \_\_\_\_\_

This application serves as your Temporary Event Permit for the operation of the concession listed above. No one may operate a Temporary Food Service Establishment without a valid permit issued for the date(s) of the event. The Temporary Food Service Permit must be conspicuously posted in view of the public. Failure to comply with requirements of the City of Longview Health Code may result in the filing of charges in court and/or suspension of your Temporary Event Permit.

**FOOD NOT APPROVED MAY NOT BE SERVED – NO HOME PREPARATION OR STORAGE IS ALLOWED FOR TEMPORARY EVENTS THAT ARE PERMITTED BY THE ENVIRONMENTAL HEALTH DEPARTMENT.**

Health Authority \_\_\_\_\_ Date \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_