



Pittsburgh Public Market
Vendor Application

Please Print Clearly

I. Business and Contact Information

Vendor Name: _____

Vendor Address: _____

City: _____ State: _____ Zip: _____

Business Name/DBA: _____

Date Est./Incorporated: _____ Tax ID #: _____

Proprietorship: _____ Partnership: _____ Corporation: _____

Company Website: _____

Phone: _____ Fax: _____ Email: _____

Description of business: _____

Do you currently have any legal action pending against you or your business? Yes No

If yes, please explain: _____

II. Products Sold and Conducting Business at Pittsburgh Public Market

Please list the items you plan to sell in detail. Submit photographs if available of each product you propose to sell as a vendor with this application and, if possible, include a photograph of your product display. If you need additional space, attach additional sheets.

1. Are you preparing food on-site to sell? Yes No (not permitted at this time)
2. Are you selling food prepared off-site? Yes No
3. Are you selling fresh, uncooked food? Yes No
4. Please list the permits and/or licenses you believe will need in order to sell your above-listed product(s):
5. Do you plan to man your vendor booth during Public Market hours? Yes No
6. How many employees do you plan to hire for your vendor space in Pittsburgh Public Market? (documentation of Worker's Compensation Insurance will be required)
7. Are you authorized to accept and redeem Farmer's Market Nutrition Program (FMNP) or WIC coupons? Yes No
8. Are you authorized to accept Food Stamps? Yes No
9. List any other venues you use to sell your products.

III. Sales Tax

According to the Pennsylvania Department of Revenue website, sales taxes is now filed either by telephone or online. To determine your eligibility to pay sales tax, refer to <http://www.revenue.state.pa.us>, where you can obtain information on whether or not you are exempt from sales tax, how to register your business and receive your exemption or where/how to pay your sales tax.

Are you selling any taxable items? Yes No
 If yes, attach a copy of your permit. PA sales tax number: _____.
 If no, attach a copy of your exemption from sales tax.

IV. Insurance and Liability

Release and Waiver. I hereby release, forever discharge and hold harmless Pittsburgh Public Market, The Strip District Public Market Council, Inc., Neighbors in the Strip, Inc., the Urban Redevelopment Authority of Pittsburgh and Baker Young Real Estate Management, and their successors and assigns, from any and all liability, claims and demands of whatever kind of

1212 Smallman Street • Mezzanine Office • Pittsburgh, PA 15222
 412-281-4505 voice • 412-201-0172 fax

nature, which arise or may hereafter arise from or in connection with my participation in Pittsburgh Public Market. I take full responsibility for my rented vendor space at the Public Market, my equipment and supplies, and all products that I bring to sell at the Public Market. I understand that all vendors are responsible for their own product liability insurance.

Please Note This Insurance Requirement:

Each Pittsburgh Public Market vendor agrees to carry and pay for liability insurance for any liability arising out of the use, occupancy, or maintenance of the Premises and all areas appurtenant thereto, with an insurance company satisfactory to the Strip District Public Market Council, with the **Strip District Public Market Council, Baker Young Corporation and the Urban Redevelopment Authority of Pittsburgh all named as additional insured**, protecting these three entities against liability for bodily injury and death and property damage with limits of at least \$1,000,000 for any one occurrence; and further, to furnish a certificate evidencing such insurance to the Strip District Public Market Council prior to opening in the Public Market. Each vendor also agrees to secure insurance coverage for all personal property improvements and betterments owned by the vendor on an "all risks" basis during the term of occupancy in Pittsburgh Public Market.

Additional Insureds:

Strip District Public Market Council
1212 Smallman Street – Mezzanine Office
Pittsburgh, PA 15222

Baker Young Corporation
One Bigelow Square, Suite 629
Pittsburgh, PA 15219

Urban Redevelopment Authority of Pittsburgh
200 Ross Street
Pittsburgh, PA 15219

Copies of ALL three certificates must be mailed to:
Pittsburgh Public Market
Attn: Cindy Cassell
1212 Smallman Street – Mezzanine Office
Pittsburgh, PA 15222

Worker's Compensation Insurance Company:

Phone Number _____ Address _____

If you do not carry Worker's Compensation Insurance, state specific exemption: (i.e., no employees) _____

V. Deposit

Vendors must pay a deposit of one week’s rent, payable to Pittsburgh Public Market, collected upon your acceptance into the market. This deposit will serve to reserve your vendor space, and will serve as a damage deposit for Market equipment used (if any) and cleanup of space. Please see Pittsburgh Public Market Rules of Operation for more information on equipment use and care/clean-up of vendor spaces. Deposits will be refunded to the applicant if the application is not accepted or will be refunded within two weeks of completion of this agreement if all Market equipment has been returned in good condition and the location of the stall has been sufficiently cleaned.

If you are a Public Market Vendor for multiple days or months, your security deposit will be held until such time as you are no longer a Public Market vendor. If during your tenure as a Public Market vendor there is a need for Market staff to clean your Market space, remove trash from your Market space or otherwise work to make your Market space amenable for the public, your deposit will be used to cover the costs of this and you will be required to pay another deposit in order to continue being a Public Market vendor.

VI. Market Booth Reservations

Please indicate the booth size you prefer: _____ 10 feet x 6 feet for \$25.00 per day
_____ 10 feet x 8 feet for \$35.00 per day
_____ 10 feet x 10 feet for \$50.00 per day

If you want to rent multiple booths, please indicate the number above.

Please indicate the days and hours that you would like to sell at Pittsburgh Public Market. **Full time vendors are required to maintain the open hours of the Public Market to ensure a complete customer experience.**

____ Fridays from 9:00 am to 7:00 pm
____ Saturdays from 9:00 am to 5:00 pm
____ Sundays from 10:00 am to 4:00 pm

Beginning on (write in the effective date): _____

Ending on (write in the termination date): _____

Delivery/Set-up Times will be 1.5 hours prior to opening time posted.

Tear-down Times will be 1 hour after closing time posted.

After your application has been accepted, Public Market staff will let you know which days can be reserved for you. Reservations are not guaranteed until Public Market staff has notified you that your application has been accepted and you have paid the deposit.

VII. Additional Costs

There is a marketing fee assessed to all Public Market vendors to support marketing and advertising for the entire Public Market. This fee will be \$2.50 per week, or \$10 per month.

If you bring coolers or freezers that use the electrical supply at the Public Market, you will receive a monthly invoice for a pro rated portion of the Public Market electrical bill.

VIII. Agreement

You may sell at Pittsburgh Public Market only **after**:

- your application has been submitted, with complete product list included
- all required forms and documentation has been submitted
- all documents have been approved by Market Council and the Urban Redevelopment Authority
- deposit and daily fee have both been paid

I understand that I am permitted to sell the products specifically listed in the section above called "products to be sold at the Public Market" and agreed upon by Pittsburgh Public Market and the Market Council. I understand that the sale of other products could result in the immediate closing of my vendor stall and loss of both the fee and deposit for that day.

My signature below indicates that I have received a copy of the "Pittsburgh Public Market Guiding Principles" and agree to them.

I hereby certify that the information provided above is true and correct and authorize you to investigate all bank, credit and trade references and agree to pay associated costs.

signature

name (please print)

date