



FOOD VENDOR APPLICATION

Fall Festival 10/21/2023
@ Plaza Park

FOR FESTIVAL USE ONLY

Date Received _____ Approved _____
 Space Fee _____ Confirmed _____
 Electricity Fee _____ Space # _____

Please complete all sections. Incomplete applications will not be accepted. **THE APPLICATION DEADLINE IS SEPT. 7, 2023.**

Business / Company Name: _____

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ E-mail: _____

CITY OF OXNARD (FOOD BOOTHS)

TYPE	SIZE	PRICE	QTY	ELECTRICITY (optional)	QTY	TOTAL PAYMENT City of Oxnard	CLEANING DEPOSIT	SEPARATE CHECK *
TFF1	10 X 10	\$250		\$25			\$100*	
TFF1	10 X 20	\$300		\$25			\$100*	
TFF2	10 X 10	\$200		\$25			No charge	
TFF2	10 X 20	\$250		\$25			No charge	
CFO	10 X 10	\$175		\$25			No charge	
MFF1	Cart	\$200		\$25			No charge	
MFF 2-4	Truck	\$300		\$25			No charge	

***Cleaning Deposit REQUIRED for TFF 1 (Refundable)- Separate check payable to the City of Oxnard.**

TFF1=TEMPORARY FOOD FACILITY TYPE 1 OPERATOR - OPEN AND/OR POTENTIALLY HAZARDOUS FOOD, INCLUDING OPEN SAMPLING.

TFF2=TEMPORARY FOOD FACILITY TYPE 2 OPERATOR - FOR PREPACKAGED, NON-POTENTIALLY HAZARDOUS FOOD/BEVERAGE AND/OR WHOLE, UNCUT PRODUCE WITH NO OPEN SAMPLING.

CFO=Cottage Food Operator – AN INDIVIDUAL WHO OPERATES A COTTAGE FOOD OPERATION IN HIS OR HERS PRIVATE HOME. FOOD IS MADE FROM AN APPROVED VCEHD HOME KITCHEN.

MFF=MOBILE FOOD FACILITY - A VEHICLE, USED IN CONJUNCTION WITH A COMMISSARY, OR OTHER PERMANENT FOOD FACILITY UPON WHICH FOOD IS SOLD OR DISTRIBUTED AT RETAIL. EACH MFF MUST OBTAIN AND DISPLAY A VALID HEALTH PERMIT TO OPERATE IN VENTURA COUNTY.

Purpose / Description - Provide a brief description of food, please include the use of bugs if applicable

VENTURA COUNTY ENVIRONMENTAL HEALTH DEPARTMENT (VCEHD)

VC Environmental Health Permits - If you are an annual permit holder with the VCEHD the following fees are not required.

- Military DD214 are exempt for payment. Please submit copy of your DD214 along with application.
- VCEHD # _____ Please submit a copy of your annual Health Permit.

TYPE	SIZE	QTY	PRICE	TOTAL
TFF1	10 x 10 or 10 x 20		137.00	
TFF 2	10 x 10 or 10 x 20		73.00	

- Please make check to VCEHD
- Fees are per booth NOT per vendor.
- Fees must be received by the application deadline in order to meet Ventura County Environmental Health Department requirements.
- **If you are NOT an ANNUAL with the VCEHD these fees are required!**

Submit this application along with fees to:

Recreation & Community Services Office, 305 W Third St (1st floor, West Wing) Oxnard, CA 93030



Are you bringing your own three-compartment sink? Yes No
If not, the Festival has sinks on-site for use. First come, first served.

City of Oxnard will provide vendors a large trash container and a recycle drum container for grease disposal.

City of Oxnard adopted Ordinance No. 3022 which prohibits the distribution of expanded polystyrene (EPS aka "Styrofoam") food containers and products at restaurants, grocery stores, convenience stores, mobile food trucks/vehicles/food vendors, street and sidewalk vendors, and outdoor food sales and other businesses, The Ordinance took effect on February 16, 2023.

Reminder: All food vendors are required to contact the Ventura County Environmental Health Department (805) 654-2431 for a permit application.

VENDOR ACKNOWLEDGMENTS. *Please read and initial each item. Incomplete applications will be rejected.*

1. I have a check payable to City of Oxnard. _____
2. I acknowledge this is a "Rain or Shine" event. _____
3. I agree to keep the booth area clean. _____
4. I agree to be respectful to patrons and participants. _____
5. I agree to arrive NO LATER than 8:30 am and leave NO EARLIER than 4:00 pm. _____
6. I acknowledge that NO REFUNDS will be issued after this application is submitted. _____
7. I have a separate check payable to Ventura County Environmental Health Division. _____
8. I have a separate check for the cleaning deposit, payable to City of Oxnard. I understand that this check will be deposited. _____
9. Cleaning deposit will be refunded after the event, I understand it can take 4-6 weeks to process refund checks. _____

WAIVER OF LIABILITY

In consideration for being permitted to participate in the Oxnard Insect Festival, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which may occur as a result of participation in this activity. This release is intended to discharge in advance, The Oxnard Fall Festival, City of Oxnard, Oxnard PAL, its officers and volunteers, sponsors, contractors and agents from any liability arising out of, or connected in any way with, my participation in this activity, even though that liability may not arise out of the negligence or carelessness on the part of the persons and entities mentioned above. I agree for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the persons and entities mentioned above and their respective elected and appointed officers, volunteers, official agents, and employees from any and all claims, demands, actions, or suits arising out of or in connection with my participation in the activity.

I have read the "Waiver of Liability" and the vendor information included with this application form and agree to the terms and conditions as outlined for this activity.

Participant Signature: _____ Date: _____

Questions or concerns? Contact us! (805) 385-7995 • oxnardrec@oxnard.org