

## Ka'u Coffee Festival Vendor Application 2016

Name of Organization/Business	
Contact Person	
Mailing Address	
Phone Number	
Email Address	
Type of Booth (check One) <input type="checkbox"/> Food <input type="checkbox"/> Other	Describe products or information offered:

**Booth Fees:** (50% discount offered to cooperatives and their members or bona fide non-profit organizations)

- \$100.00 Food Vendor
- \$60.00 Other non-food items and crafts – includes coffee and coffee samples
- \$35.00 for pre-approve informational displays

**Food Vendors** are limited to two (2) different food item per application. Example: Teri Beef and Hot Dog. Get your application turned in early there will be no duplication of food booths. There will be only one cold drink booth. No drinks to be sold along food items.

**Each vendor** is responsible for the following:

- Ka'u Coffee Festival Booth Fee
- Department of Health Permit, if serving food items. (\$25.00 DOH fee) Gail Nagata 933-0918
- Vendor Permit form from the County of Hawaii. (\$30.00 COH Fee) Nona Makuakane 928-3102
- COH requires proof of General Excise License
- Supply your own 10 x 10 tent, tables, chairs, signs and all other equipment as needed.
- No electricity available for vendors. Must provide your own generator if needed.
- Removal of vehicles from event vendor area by 8:00 a.m.
- Be ready to serve the public 9:00 a.m. to 5:00 p.m.
- No smoking, no drugs, no alcohol, no propaganda, political speech, nor activism are allowed.

**Ka'u Coffee Festival is a Green Event.** All vendors are encouraged to use biodegradable products whenever possible.

**Application Deadline: Friday, May 13, 2016. As available. First come, first served.**  
**Send in your application to the attention of Brenda Iokepa-Moses, P.O. Box 208, Pahala, Hawaii 96777 or email: [biokepamoses@gmail.com](mailto:biokepamoses@gmail.com), questions call 808-896-3932.**

*I agree to the terms and conditions of this application and understand that the Ka'u Coffee Festival reserves the right to terminate my booth at any time if I am not in compliance.*

Person Responsible \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only:

Date application received:
Booth Space Number Assigned:
Department of Health Permit:
Ka'u Coffee Festival Fee: