

TAILGATE CONTRACT

**OBMS TAILGATE AT
105 S. Palm Ave
Rialto, CA 92376**

(Corner of 1st St. and Palm Ave in Rialto, across from Rialto City Hall)

**Please postmark the OBMS application and the Rialto Events Vendors Application to OBMS
by Nov. 15, 2016**

**Open to the public on December 9 - 10, 2016
Set up on Thursday, December 8, 2016**

Please tell us something about what you sell. Thank you.

I have read the cover page and understand the agreement written.

PRINT NAME _____

SIGNATURE _____

BUSINESS NAME _____

LICENSE # _____

ADDRESS _____

EMAIL

_____ **PHONE** _____

COST: I'll need _____ full space (20x40 ft.;4 parking spaces) at \$60
or _____ half space (20x20 ft.; 2 parking spaces)for \$30.
(Includes cost of Rialto Events Vendors Application Fee)

Interested in the next show? _____

AMOUNT ENCLOSED \$ _____

**PLEASE MAKE CHECK OR MONEY ORDER TO
ORANGE BELT MINERALOGICAL SOCIETY
P.O. BOX 285
SAN BERNARDINO, CA 92402**

**ORANGE BELT MINERALOGICAL SOCIETY
P.O. BOX 285
SAN BERNARDINO, CA 92402
Contact: Jessica at (909) 887-5507**

The dealer spaces will be outside and will consist of either a full space or a half space.

The spaces have no electricity or running water. Please keep your area clean. A port-a-potty is available and a trash dumpster is provided.

Dealer Responsibility is to comply with all state and local laws and regulations required to sell in San Bernardino County you have a resale license. Rialto requires Events Vendors Application. We will submit the application you send to OBMS (postmarked by November 15) for you.

Neither the city of Rialto nor O.B.M.S. assume any responsibility or liability for the safety of exhibits, dealers, or their employees from robbery, pilferage, damage by fire, storm, accidents, or any other harm as may result from the participation in the show.

Dealers may begin to setup after the lot has been marked out on Thursday, but Rialto does not allow you to sell that day. We advertised to the public 9 AM to dusk on Friday and Saturday

If you would like to contribute to the raffle, O.B.M.S. would greatly appreciate it and hold the prizes in high value. Please bring your contribution to our raffle booth, and we thank you. Also, please bring your flyers and information to the raffle booth and we will gladly pass them out.

O.B.M.S. welcomes and appreciates any demonstrators; they are welcome to sell their product.

You are welcome to camp in your spot.

There will be a BBQ on Friday Night - hamburgers, hot dogs, and club potluck. Dealers are free. O.B.M.S. does this as a thank you. We eat between 5:00 – 6:00 p.m.

Come spend the weekend with us and help make this an enjoyable event

Thank you.



CITY OF RIALTO

150 South Palm Avenue • Rialto, CA 92376
• (909) 820-2302 •

Payment Due:

Expiration Date:

EVENTS VENDORS APPLICATION

Your Business Tax is now due and payable. To avoid penalty fees, submit payment before expiration date.

• OFFICIAL USE ONLY •

Business Name _____

Business Location _____

(Not P. O. Box)

City _____ State _____ Zip _____

Mailing Address _____

(if Different)

City _____ State _____ Zip _____

Bus. Phone () _____ Bus. Fax () _____

E-Mail Address _____

BUSINESS LICENSE NO. _____

LICENSE FEE \$ _____

TOTAL AMT. PAID \$ _____

DATE PAID _____

CASH / CHECK / MONEY ORDER

RECEIPT NO. _____

CODE _____

Start Date	Description of Business

Ownership: Corporation Ltd Liability Corp Partnership Sole Proprietor Trust

State Lic. No. _____ License Type _____ Expiration Date _____

Resale No. _____ Federal I. D. No. _____ State I. D. No. _____

This section must be completed for each owner, partner, corporate officer and local manager. (See reverse side for explanation)

Owner Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

City _____ State _____ Zip _____ Date of Birth _____

Social Security No. _____ Drivers License No. _____

Owner Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

City _____ State _____ Zip _____ Date of Birth _____

Social Security No. _____ Drivers License No. _____

In case of emergency, please contact:

Name _____ Title _____ Phone () _____

Address _____ Cell Phone () _____

This Permit is for Special Events ONLY. It does not sanction any act not otherwise permitted. In addition to this permit, Vendors must obtain authorization from the Sponsoring Agency. Applicant is responsible for obtaining State of California Sales Tax Number, if necessary, and to provide such number to the City of Rialto.

Location of Event: _____

If you closed your business prior to the expiration date, please enter closing date and sign.

Signature

PLEASE CALCULATE AMOUNT DUE BY ENTERING INFORMATION IN BOXES BELOW AND SIGN.

Weekly Rate: \$ 5.00

Amount of License Tax \$

TOTAL AMOUNT DUE \$

*Thank you for doing business
in the City of Rialto!*

I declare under penalty of perjury that the statements made herein are true and correct to the best of my knowledge and belief and that I have read this notice at Rialto, California.

Date: _____ Signature of Owner or Representative: _____

RETURN ENTIRE APPLICATION FORM TO ABOVE ADDRESS AND MAKE CHECK PAYABLE TO THE CITY OF RIALTO