



28<sup>th</sup> Annual  
**PUMPKINFEST**  
Downtown Franklin, NC  
Saturday, October 19, 2024 • 9:00am to 4:00pm

## 2024 Food Vendor Application

Thank you for your interest in the 28<sup>th</sup> Annual PumpkinFest in Franklin, North Carolina. The Town of Franklin is pleased to host this annual celebration of Autumn on Saturday, October 19, 2024, from 9:00am to 4:00pm in Downtown Franklin.

### **ABOUT THIS APPLICATION:**

THIS IS AN APPLICATION AND **NOT A CONTRACT**. COMPLETING THIS APPLICATION DOES NOT MEAN AUTOMATIC ACCEPTANCE AS A VENDOR INTO THE 28th ANNUAL PUMPKINFEST IN FRANKLIN, NORTH CAROLINA. THE TOWN OF FRANKLIN RESERVES THE RIGHT TO DECIDE WHICH APPLICATIONS TO ACCEPT.

BY SUBMITTING THIS APPLICATION, YOU ACKNOWLEDGE YOU HAVE READ THE GUIDELINES, AND THIS APPLICATION IS CONSENT TO ABIDE BY THESE GUIDELINES.

**Absolute deadline for Vendor Applications is Thursday, August 29, 2024.**

**NO RAIN DATE - NO REFUNDS IN CASE OF RAIN**

**Vendors must also comply with Macon County Health Department Regulations and submit any associated fees. It is your responsibility to call Macon County Public Health at 828-349-2490 for permitting and information.**

## **GENERAL FESTIVAL VENDOR INFORMATION:**

### **BOOTH SPACE:**

This festival is an outdoor event and is held rain or shine. All spaces are 10' x 10'. **If your food vending requirements are larger than 10' x 10' you must rent two spaces.** The area around the booth space must be kept free of litter.

### **VENDOR PLACEMENT:**

ALL BOOTH PLACEMENT is at the discretion of the festival organizers. While you may request a specific location, it **CANNOT** be guaranteed.

### **HANDICAPPED ACCESSIBILITY:**

All booths will be positioned as to not impede handicapped access to crosswalks, restrooms and other facilities. If your booth interferes with handicapped access you will be required to move and reposition your booth.

### **FOOD & BEVERAGES:**

Food & Beverage Vendors have exclusive rights to sell these items. Food and beverages may not be sold or distributed by arts & crafts vendors or non-profit organizations.

### **LAWS & SALES TAX:**

Compliance with applicable state or federal laws is the responsibility of the exhibitor. We are not responsible for, nor do we collect sales tax; however, the North Carolina Department of Revenue may require us to submit names and addresses of vendors. It is your responsibility to comply with state sales tax law.

### **VEHICLE ACCESS:**

Main Street, through Downtown Franklin, as well as portions of Lotla and Phillips Street is closed to traffic during the event. Vendors attending PumpkinFest have designated parking. If you have special needs such as resupplying, please note that on your application.

## **FOOD VENDOR GUIDELINES:**

**Eligibility:** PUMPKINFEST is open to all Food Vendors and many beverage vendors. **ALCOHOL MAY BE ALLOWED under Town of Franklin Ordinances and the social district rules.**

### **Rules & Regulations:**

**MENU & PRICING is to be posted clearly and readily available for festival attendees.**

**NO GARBAGE** may be left on street. All trash must be discarded only in FESTVIAL approved dumpsters. A map where the dumpsters are located will be enclosed in final set up information. Any vendor found dumping in non-approved dumpsters will not be permitted to attend the festival next year and could be subject to a dumping fee.

**NO DUMPING OF GREASE IN CITY SEWERS.** Grease must be disposed of appropriately according to Town Code.

### **\*\*\* IMPORTANT / HEALTH DEPARTMENT GUIDELINES \*\*\***

**Vendors must also comply with Macon County Health Department Regulations and submit any associated fees. It is your responsibility to call Macon County Public Health at 828-349-2490 for permitting and information.**

The Macon County Public Health application must be submitted with associated fees (if necessary) no later than is two weeks prior to the event. No exceptions.

**For your convenience Macon County Public Health Guidelines as well as an application are attached. You must adhere to the regulations set forth by Macon County Public Health and the State of North Carolina. Failure to do so will result in not being able to participate in PumpkinFest. Once your application is accepted, NO REFUNDS are given for failure to comply.**

You'll find more information at [www.maconnc.org](http://www.maconnc.org). Under the County Agencies tab select Health Department then Environmental Health and Food and Lodging from the sub tabs.

### **Entry and Fees:**

To enter, exhibitors must submit a completed application with the appropriate fees.

**10' x 10' space is \$150.00**

**Power, if required, is \$35.00 additional**

### **PAYMENT OF VENDOR FEES:**

**If applying before June 30, 2024, please post-date your check for July 01, 2024.**

**Forms of Payment:** Please enclose a check or money order payable to the Town of Franklin. **Credit cards ARE NOT ACCEPTED.**

If applying in person, vendor fees may also be paid in cash at Franklin Town Hall, 95 East Main Street, Franklin, NC 28734. Service window hours are 8:30am to 4:55pm Monday through Friday.

### **FOOD/BEVERAGE VENDING SETUP:**

**The PumpkinFest Food Court is located on Iotla Street. Set up is Friday, October 18th, from 5:30 pm to 7:00pm. You may also set up on Saturday, October 21st, if necessary. You must be in place and set up for Macon County Public Health Inspection no later than 8:30 a.m.**

A completed Application with ALL required attachments must be received for your Application to be processed; not providing these requested items could result in immediate denial of your Application. Upon completion of the Review Process, a letter will be mailed to you in a timely manner, indicating whether your Application has been approved or denied. **If your check is cashed by September 6, 2024, you should consider this as confirmation of your approved Application.**

**For applications NOT ACCEPTED, your payment will be returned to you via postal mail. Should you have further questions call the Town of Franklin at 828-524-2516 or email [pumpkinfest@franklinnc.com](mailto:pumpkinfest@franklinnc.com).**

**2024 PUMPKINFEST FOOD/BEVERAGE VENDOR APPLICATION**  
**PLEASE NOTE PAYMENT INFORMATION BELOW**

**PAYMENT OF VENDOR FEES:**

**If applying before June 30, 2024, please post-date your check for July 01, 2024.**

Mail application, application vendor fees and requested supporting materials to:  
Town of Franklin, PO Box 1479, Franklin, NC 28744-1479  
\*\*(online registration not available)\*\*

**Please make sure your current mailing address is listed on your application.**

**Please print legibly:**

Vendor Name \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Type of Food/Beverage \_\_\_\_\_

Email Address \_\_\_\_\_

Best Phone Number ( ) \_\_\_\_\_ Best Time To Call \_\_\_\_\_

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

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

**Booth Requirements:**

1. Number of 10' x 10' spaces @ \$150.00 Each \_\_\_\_ x \$ 150.00 = \$ \_\_\_\_\_
2. Power needed @ \$35.00 Additional - \$ \_\_\_\_\_

**Total Enclosed: \$ \_\_\_\_\_**

**PLEASE READ:** Food / Beverage Vendors, exhibitor, artist, crafter, non-profit or any organization contracting for or using booth space shall and will indemnify and hold harmless the Town of Franklin and any and all persons acting as festivals organizers, promoters, volunteers, etc. from and against any and all liability, claims, thefts, demands, expenses, fees, fines and penalties, suits, proceedings, actions, and causes of action of any and every kind and nature arising or growing out of or in any way connected with exhibitor/artist/crafter/non-profit's use of booth space during said Festival.

**Food Vendor agrees to abide by all rules and regulations.**

I agree \_\_\_\_\_  
*(Name & signature of individual and/or organization representative)*

Date \_\_\_\_\_

*Attests that signor has read the above indemnity clause and agrees to the terms contained herein.*

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**FOR OFFICE USE ONLY**

*Amount Paid \$ \_\_\_\_\_ Power Required (circle one): YES NO*

*Date Received \_\_\_\_\_*

*Type of Payment (circle one): CASH CHECK MONEY ORDER*

*Booth # \_\_\_\_\_ Booth Location \_\_\_\_\_*



Macon County  
Public Health

# TEMPORARY FOOD STAND/ COMMISSARY PERMIT APPLICATION

Available on-line at [www.maconnc.org/environmental/food.html](http://www.maconnc.org/environmental/food.html)

**\*A \$75 Fee must be submitted with each application\***

**Application must be submitted no less than 2 weeks prior to the event, and include a detailed layout of the establishment.**

**ALL 3 Pages must be Complete & Signed**

## **Event Information**

Event Name \_\_\_\_\_

Food Stand \_\_\_\_\_ or Commissary \_\_\_\_\_ (Check One)

Event Coordinator \_\_\_\_\_ Event Location \_\_\_\_\_

Set-Up Date and Time \_\_\_\_\_ Hours of Operation \_\_\_\_\_

Water Source \_\_\_\_\_ Wastewater Source \_\_\_\_\_

Event Dates \_\_\_/\_\_\_/\_\_\_ Time \_\_\_\_\_ Ending \_\_\_/\_\_\_/\_\_\_ Time \_\_\_\_\_

## **Vendor Information**

Organization/business Name \_\_\_\_\_

Contact Name \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax ( ) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_

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

**\*MENU ITEMS ARE SUBJECT TO APPROVAL AND MAY BE RESTRICTED\***

Menu: \_\_\_\_\_

Food Sources (i.e.: Grocery Store) \_\_\_\_\_

Cooked foods cannot be brought from previous events, and all raw meat must be received in ready to cook portions.

\*Note: If non-profit, tax exempt or a political fund raising group then attach documentation for exemption consideration.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

## FOR ENVIRONMENTAL HEALTH SECTION USE

.....  
\_\_\_\_\_ Permit is Required

\_\_\_\_\_ Permit is not Required—exempt under GS 130A-250(7) or food items not regulated under 15A NCAC 18A .2600

OFFICE USE ONLY Amount Paid \$ \_\_\_\_\_ Cash ( ) Charge ( ) Check # \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

## Macon County

### Temporary Foodstand Evaluation Checklist

- \_\_\_\_\_ food covered and protected (barrier to shield food from the public)
- \_\_\_\_\_ refrigeration: 41°F or less with accurate air thermometer
- \_\_\_\_\_ utensils and equipment protected (clean and covered)
- \_\_\_\_\_ utensil sink with drain boards or counter space large enough to accommodate largest utensil
- \_\_\_\_\_ clean location and equipment
- \_\_\_\_\_ \*metal stem-type food thermometer accurate to +2°F (0-220°F)
- \_\_\_\_\_ \*properly mixed sanitizer (50 to 100 ppm chlorine) in a labeled spray bottle for use on all clean food-contact surfaces
- \_\_\_\_\_ \*sanitizer test strips
- \_\_\_\_\_ approved employee hand-washing facilities/hand soap/paper towels
- \_\_\_\_\_ ability to heat water
- \_\_\_\_\_ approved food-grade hose for potable water connections
- \_\_\_\_\_ potable running water under pressure
- \_\_\_\_\_ effective measures taken for fly control (i.e. fans, screens)
- \_\_\_\_\_ tight fitting lids on garbage cans, approved garbage disposal method
- \_\_\_\_\_ sewer connection leading to proper location (not a storm drain) or proper holding tank and contract with a licensed septage hauler

*These conditions must be met to obtain a food-handling permit*

#### **\*Recommended Items\***

#### **Be prepared to discuss the following during permitting:**

Will other food prep locations on or off the event location be used (i.e. restaurants, caterers, trailers). Is there adequate refrigeration? How and where will food be thawed? How will food be cooked? What is your method for holding food hot and/or cold? Are toilet facilities adequate for the number of visitors expected? Sick employee policy.

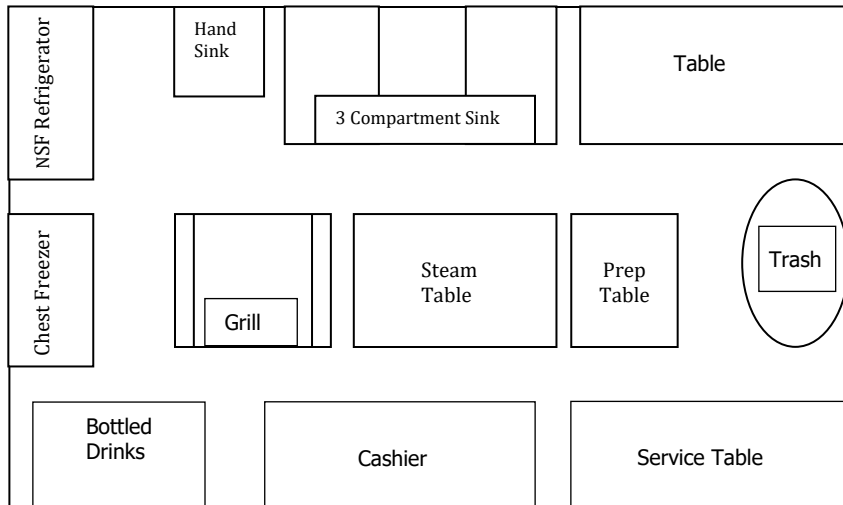
Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_



**TFE Floor Plan (view from top)**

In the following space, provide a drawing of the TFE. Identify and describe all equipment including cooking and hot/cold holding equipment, handwashing facilities, worktables, dishwashing facilities, food and utensil storage, garbage containers, and customer service areas. List type of structure, ground cover to be used and fly prevention.

Example:



Blank space for drawing the TFE floor plan.

I hereby certify that the above information is correct and I fully understand that any deviation from the above without prior consultation with Macon County Department of Public Health may nullify final approval and prevent issuance of a temporary food establishment permit. **I understand that incomplete/incorrect applications will not be processed.**

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_