



Cantu/Pan American Recreation Center 2017 Hillside Summer Concert Series Temporary Concession Application

Applicant Information

Company Name: _____

Contact: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

Permit Request

Type (check one):

Single Day: ☐

Temporary (Up to 6 Months): ☐

Performing Artist: ☐

Please list date(s) you wish to be in the park: _____

Park Information

Park: Pan Am Park

Location within Park: Parking Lot

First alternative location within Park: N/A

Second alternative: N/A

Second Park (if 1st choice is not available): N/A

Does each location meet the American's with Disabilities Act requirements? Y



Concession Information

Please list the exact products you will offer and the prices of those products (use additional attachment if needed):

Description of Stand/Trailer (must include picture):

Utility requirements (specify electrical and water needs):

ON-SITE UTILITIES NOT AVAILABLE



Experience serving crowds in a park like environment. Must list name of events, date(s) of events, and total event sales:

Permits/Insurance Information

Do you have a food sales permit issued by the Austin/Travis County Health and Human Services Department? _____ If applicable, please list permit number _____. If you do not have a health permit, you must have one before you sign a contract.

At the time the contract is signed, the concessionaire must provide a Certificate of Insurance listing the City of Austin as an additional insured party and a State of Texas Sales and Use permit issued by the State Comptroller's Office. For insurance requirements see attachment "A."

Return completed application to the City of Austin Parks and Recreation Department with the attached documentation:

- ☐ **Photograph of booth/trailer**
- ☐ **Copy of Texas Sales and Use Tax Permit**

Verification

I verify that all of the above information is true. I have also read, understand, and I am willing to comply with the concession policies and procedures set by the City of Austin Parks and Recreation Department.

Signature of Applicant

Date

If you would like to send your application via mail or have any questions about concessions please refer to the contact information below:

attn: Davin Bjornaas



Mailing Address:

200 S. Lamar

Austin, Texas 78704-1046

Phone: (512) 974-6700

Fax: (512) 974-6729

E-mail: Davin.Bjornaas@austintexas.gov

Parks and Recreation Department Approvals: (office use only)

Approved Financial Services
Signature

Printed Name

Date

Approved Site's Supervisor/Manager
Signature

Printed Name

Date

Approved Site's Division Manager
Signature

Printed Name

Date