



**CITY OF CHINO**  
**FOOD VENDOR APPLICATION**  
**BARK AROUND AYALA PARK**  
 RUBEN S. AYALA PARK, 5575 EDISON AVENUE, CHINO, CA 91710  
 SATURDAY, NOVEMBER 8, 2025

Office Use Only Date Received: _____ Staff's Initial: _____
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Name of Organization/Company \_\_\_\_\_ E-mail \_\_\_\_\_  
 Full Name of Contact Person \_\_\_\_\_ DOB \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Day (\_\_\_\_) \_\_\_\_\_ Mobile (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_  
 Emergency Contact \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

**PARTICIPANT INFORMATION:**

- Profit Food Vendor: \$85       Non-Profit Food Vendor: \$40       Cottage Food Vendor: \$40

Please list all food items, beverages/refreshments, etc. to be sold. Food Vendors will be selected based on application priority and food items. Water and soda can be sold for no more than one dollar. **Only the items listed here and approved by the City will be allowed to be sold in your booth, no exceptions.**

1<sup>st</sup> Choice: \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_

Food will be:     Prepared on-site     Pre-packaged (Cottage Food)    Will you need electricity?     Yes     No

Type of booth:     Canopy; measurements \_\_\_\_\_     Food truck; measurements \_\_\_\_\_

Number and type of electrical items to be used: (Coffee pot, crock-pot, etc.) \_\_\_\_\_

What type of fire extinguisher will you have in your booth/food truck? Fire extinguisher grade \_\_\_\_\_

- At minimum, a Class 2A10BC Fire Extinguisher is required for open flames.
- What type of Health Permit do you have with San Bernardino County?  
 Annual permit     One-day permit    **HEALTH PERMIT #** \_\_\_\_\_
- Submit a copy of the annual permit with this application. One-day permits must be made available to the City five days prior to the event. For more information visit, <https://ehs.sbcounty.gov>.

**EVENT REQUIREMENTS**

- Complete application form and submit. (Payment is due after approval of participation from City staff.)
- Completed applications will be accepted on a first-come, first-served basis. Incomplete applications will not be processed. Submit signed City of Chino Waiver Form. (See waiver on the back of this form.)
- **City of Chino Business License. BUSINESS LICENSE #** \_\_\_\_\_
  - All vendors are required to submit a One-Day Temporary Permit. A One-Day Temporary Permit is \$20. Additional fees may be required by the City of Chino Finance Department, Business Licensing, 909.334.3263.
  - Fees will be waived for businesses who have a current City of Chino Business License. Must complete one day vendor permit form.
- **I am a non-profit organization and have a valid 501(c)(3). 501(C)(3) #** \_\_\_\_\_
  - All non-profit organizations are required to obtain a One-Day Temporary Permit.
  - Fees will be waived upon verification of non-profit status by Finance Department, Business Licensing.
- **All vendors (excluding non-profit) need a Seller's Permit:**
  - I hold a valid City of Chino seller's permit. **My number is:** \_\_\_\_\_
  - My sales are exempt occasional sales, less than three times per year. *Your information will be submitted to the State of California for confirmation.* For more information visit, <https://www.cdtfa.ca.gov>.
- **Once approved, food vendors and cottage food vendors must provide the following:**
  - Temporary Food Facility (TFF) Health Permit or Cottage Food Health Permit from the San Bernardino County Department of Environmental Health Services.
  - Proof of \$1 Million liability insurance and endorsement page listing the City of Chino as additionally insured.

**GENERAL FOOD VENDOR INFORMATION**

- Booth set-up begins at **7:30 a.m.** Please have booth ready by **8:30 a.m.** **Vehicles must be out of the event area by 8:15 a.m. For the safety of the participants, vehicles will not be allowed to enter/exit until City staff determines it to be safe. Vendor must drive no more than 5 mph in the event area.**
- The City of Chino will not monitor nor guarantee exclusivity of merchandise sales.
- Any vendor (food/partner) leaving early, behaving inappropriately or unsafely during the event will affect any future application submission date and participation for future events.
- standard 10' x 10' space will be provided for registered vendors. Electricity (20-amp circuits) will be provided only if requested in advance.
- Accessible Vending requires a maximum counter height of 34". Vendors shall ensure access to good and services for people with disabilities.
- Registered vendors are responsible for supplying their own tables, chairs, canopy weights, and must comply with all County Health and Fire Department requirements (fire extinguisher, screening, hand washing equipment, etc.).
- **No refunds after Friday, October 10.**
- If the event is *cancelled* due to severe weather, a full refund will be issued for booth fee. However, **Business Licensing does not provide refunds.**

PLEASE INITIAL THAT YOU AGREE TO THE ABOVE: \_\_\_\_\_

Complete applications will be accepted **ONLY** through **Friday, October 17, or until spots are filled.**

**Submit complete applications to:**

Email: [healthychino@cityofchino.org](mailto:healthychino@cityofchino.org)

Mail/In-Person: Carolyn Owens Community Center • 13201 Central Avenue • Chino, CA 91710

Attn: Rachel Phelps, Community Services, Parks & Recreation Coordinator

**For more information or special requests/considerations, please contact:**

Healthy Chino at 909.334.3478, [healthychino@cityofchino.org](mailto:healthychino@cityofchino.org)

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**FOOD VENDOR WAIVER**  
**\* WAIVER AND RELEASE BY APPLICANT(S)**  
**FOR PARTICIPATION IN A CITY OF CHINO SPONSORED PROGRAM AND/OR**  
**USE OF A CITY OF CHINO FACILITY**

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Participant Name: \_\_\_\_\_ Activity: Bark Around Ayala Park

Program Dates: From: Saturday, November 8, 2025 To: Saturday, November 8, 2025

In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

1. My participation, and/or that of my child/children/guardians, is voluntary.
2. My participation, and/or that of my child/children/guardians, may result in injury, death, property damage, and other losses, and I assume all of those risks.
3. I am legally competent to understand and accept the associated risks.
4. I waive, and release the City, its officials, employees, and volunteers from, all claims for any injury, death, property damage, or other loss resulting from my participation in the activity, and/or that of my child/children/guardians.
5. I am responsible for payment of all fees for, and liabilities and damages resulting from, my participation in the activity and/or that of my child/children/guardians, including damages to City property, injury to other participants, or other losses of any kind.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my willful misconduct, and/or that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that such photographs and film will be the sole property of the City and that neither I nor my child/children/guardians will be entitled to any license fee or royalty for the City's use thereof.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed and implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission related to the activity.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use of rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.

**I am signing a full release of any and all liability against the City of Chino and do so of my own free will.**

Printed Name: \_\_\_\_\_  Parent/Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (day): \_\_\_\_\_ Phone (evening): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Organization (if any): \_\_\_\_\_

\*\*\*\*\* **FOR OFFICE USE ONLY** \*\*\*\*\*

Staff member printed name: \_\_\_\_\_ Date: \_\_\_\_\_

# VENDOR PERMIT APPLICATION

13220 CENTRAL AVENUE CHINO, CA 91710 (909) 334-3263 FAX (909) 334-3727  
MAILING ADDRESS: P O BOX 667 CHINO, CA 91708-0667

CITY OF CHINO  
FINANCE  
DEPARTMENT

## BUSINESS INFORMATION

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

Emergency Phone (After hours): \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

Website Address: \_\_\_\_\_

## OWNER/OFFICER INFORMATION

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Drivers Lic. # \_\_\_\_\_

Social Sec. # \_\_\_\_\_

Drivers Lic. # \_\_\_\_\_

Social Sec. # \_\_\_\_\_

IS THIS A  CORPORATION  PARTNERSHIP  LLC  SOLE OWNERSHIP (please check one)

## CORPORATE INFORMATION (Please complete this section if you are a corporation, or if your corporate offices are located elsewhere).

Corporate name: \_\_\_\_\_

Federal Employer's ID# \_\_\_\_\_

State ID# \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

NAME OF EVENT: \_\_\_\_\_

EVENT LOCATION: \_\_\_\_\_

DATES OF EVENT: \_\_\_\_\_

STATE BOARD OF EQUALIZATION PERMIT #: \_\_\_\_\_

PLEASE DESCRIBE YOUR BUSINESS ACTIVITY IN DETAIL \_\_\_\_\_

I hereby certify that the information provided on this form is true and correct to the best of my knowledge and ability. I acknowledge that applying for a business license does not guarantee the right to conduct any business activity that is in violation of any city code. All permits required from city departments must be obtained before any business activity will be allowed.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_