

<https://www.seattle.gov/parks/about-us/contracts-and-partnerships/partnership-opportunities/concessions>

Please complete this application in Adobe Reader or type information and email to sprconcessions@seattle.gov Include as attachments, a signed FAQ, City of Seattle Business License, King County Health Permit, Commercial Liability Insurance COI & Additional Insured, maps (if needed) and photos of vending truck, van, cart, kiosk, or canopy.

Unsigned applications will not be accepted. This document should be emailed to sprconcessions@seattle.gov.

Post-RFP-Process Applications will be accepted beginning at 1:00pm, May 31, 2024. Applications and/or documents sent prior to this time and date will not be processed. The first applicant to submit ALL requirements in acceptable format will be permitted, if they meet all requirements and commit to vending most days throughout the vending season.

Language Assistance: If you require assistance or language translation, please email with your phone number and the specific language for which you require translation services.

Contact Information

**Required Information*

Organization Information					
*Company Name:		*Organization Type (For Profit or Non-Profit):			
*Address:		Suite:	*City:	*State:	*Zip Code:
*Phone:	*Email Address:	Organization Website:			
Business Owner(s) (Primary Contact)					
First Name*	Last Name*	Gender	Ethnicity (Optional)	Languages (Optional)	Date of Birth*
Residential Address*		Apt/Suite	City*	State*	Zip Code*
Primary Phone*	Cell Phone	Email Address*			
Secondary Contact					
First Name	Last Name	Gender	Ethnicity (Optional)	Languages (Optional)	Date of Birth
Residential Address		Apt/Suite	City	Zip Code	State
Primary Phone	Cell Phone	Email Address			

Organization Description and Proposed Services

In this section, you will describe your proposed business, any positive financial, environmental, social, or cultural benefit to the City of Seattle. Please be as complete as possible in the space allotted.

Type of Organization			
	Are you registered with the city as a Women/Minority Business Enterprise (WMBE)? Go to Seattle.gov/OBD to register.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	How Long has this organization been in the concessions business? What is your experience operating a small business? Clearly articulate the business and the length of time in business?		
Experience in Concessions Business (Include number of months or years)			
Business License & Insurance	Concessionaires need a City of Seattle business license and insurance that additionally covers the City of Seattle. Additional Insurance information found at https://www.seattle.gov/parks/about-us/contracts-and-partnerships/partnership-opportunities/concessions Failure to produce all permit requirements, including acceptable Commercial Liability Insurance, within two weeks of notification of selection, may result in the loss of vending opportunity and vending location may be offered to another vendor. Initial to confirm that you've reviewed/understood City insurance requirements. _____ <u>Please attach a photocopy of your City of Seattle Business License.</u>		
	Please describe the proposed services. How does your business enhance the park?		

Proposed Services	Please explain the features of your menu/the products you are offering. Food Vendors-Describe what healthy/healthier menu options you intend to provide.
Presentation	Please describe your canopy, tent, kiosk, cart, food truck, and/or equipment and attach photos. Pictures of your proposed canopy, tent, kiosk, cart, food truck/vehicles and equipment are required and will be evaluated during the review process. <u>Food vendors:</u> Seattle-King County Department of Public Health must approve all proposed kiosks, carts, and food trucks/vehicles. King County Health will not issue a permit that is acceptable for a SPR Seasonal Concessions Permit if you are vending food from a canopy or tent.
	How will your employees be attired?
Proposed Schedule of Operations	What are your start and end dates of operation? What days and hours will you be vending in the park? If selected, SPR expects you will operate during the dates, days, and hours you list and may terminate a permit if vendor fails to operate during the dates, days, and hours stated on their application.
	Requested Start Date: _____
	Requested Last Date: _____
Days of the Week: _____	
Vending Times: _____	
Additional information:	

	<p>Please give us an idea of your proposed menu, pricing, and portion sizes. Do <u>not</u> include the sales tax. Note: Food vendors must either obtain a Mobile Food Vending permit from King County Health or limit their menu to “exempt” food items. Applicants should contact King County Health prior to submitting a Seasonal Concessions Proposal/Application. All operators of food trucks, food carts, or other food service concessions will be required to provide some healthy food options on their menu.</p>			
Menu and Planned Prices	Item	Portion	Price	Comment
	<i>Example: Soda Pop</i>	<i>12 oz. can</i>	<i>\$1.00</i>	
	<i>Example: Coffee</i>	<i>8 oz. cup</i>	<i>\$1.00</i>	<i>Organic Fair-trade coffee</i>
Business References or Financial References	<p>Please provide three (3) financial or business references. These could be financial institutions, suppliers, insurance companies, or clients. Must provide full name, title, and contact information to receive points.</p>			
	Name of Reference: _____			
	Address: _____ City: _____ State: ____ Zip: _____			
	Phone Number: _____ Relationship to Provider: _____			
	Name of Reference: _____			
	Address: _____ City: _____ State: ____ Zip: _____			
	Phone Number: _____ Relationship to Provider: _____			
Name of Reference: _____				
Address: _____ City: _____ State: ____ Zip: _____				
Phone Number: _____ Relationship to Provider: _____				
<p>Please attach photos, maps, menus, or any other documents that help us understand your proposal.</p>				

Seasonal Concession Fees

Based on your expertise in the seasonal concession business and having:

- 1) Thoroughly read the enclosed RFP documents
- 2) Asked SPR any questions you may have about the terms, conditions, and responsibilities described
- 3) Visited the proposed sites
- 4) Sought legal and financial advice as needed
- 5) Researched the applicable laws, ordinances, statutes, and regulations, you make the following firm and irrevocable offer to pay concession fees as shown below:

	You are bidding on a vending permit for the peak season Memorial Day to Labor Day (May 25 – September 2). May and September are pro-rated. Full-month permits are available if desired. Extended permit dates are dependent upon park availability and approval.	
	Concession Food/Non-Food Vending Fees 2024	Monthly Rates
Fees Peak Season Rates: May 1 – September 30 Off Peak Rates: October 1 – April 30 <i>Leasehold Excise Tax of 12.84% applies to park concession fees</i>	Tier 1 Parks: Matthews Beach Park	\$600 Peak/Per Month of Use \$100 Off Peak/Per Month of Use
	Tier 2 Parks: Bergen Place, Golden Gardens Park (Non-Food Only), Madison Beach Park, Magnuson Park #2	\$300 Peak/Per Month of Use \$75 Off Peak/Per Month of Use
	Tier 3 Parks: Be'er Sheva Park, Cal Anderson Park, Freeway Park, Jefferson Park, Lower Woodland Playfield, Mount Baker Beach, Pritchard Beach Park, Stan Sayres Park	\$150 Peak/Per Month of Use \$75 Off Peak/Per Month of Use
	Other Park: _____	
	Pilot Program: Alki Beach Park #1	\$75 per month of use
	* Tier levels are determined by a variety of factors including park attendance size and need of activation and services.	
	<u>Please indicate the parks you are requesting in order of preference:</u>	
	1) _____	2) _____
	3) _____	4) _____
	<i>Fees are payable in advance. For each park you operate in, there is a \$75 permit fee (per location) due at the time of permit issuance. Through this process, you are bidding on the peak season, May 25-September 2.</i>	
	<i>If you are requesting to vend at multiple parks or an extended season, explain how you intend to staff both locations. Include the number of hours you will commit to vend at each location:</i>	
	<u>The payment plan options are as follows:</u> 1. Pay in full at the time of permitting or 2. Submit monthly payment to the City Treasury by the tenth of each month.	

Your signature below indicates that you have read the document and understand your payment responsibilities.

Applicant Signature	Date	Applicant Printed Name
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____ By initialing this line as an electronic signature, I agree to all the terms and conditions that my apply to the Seasonal Concessions permitting process and agree that all information contained in this proposal is true and correct to my knowledge. All documents received by the City of Seattle are public documents and subject to public disclosure in accordance with the Washington State Public Disclosure Act.