



11333 N. Cedarburg Road
Mequon, WI 53092
Phone: 262-236-2941
Fax: 262-242-9655

www.ci.mequon.wi.us

FESTIVALS COMMITTEE
Wednesday, January 18, 2023
6:30 PM
North Conference Room

Agenda

- 1) Call to Order, Roll Call
- 2) Approval of Meeting Minutes
Action requested: review and approve
 - a. November Meeting Minutes
- 3) Winter Wonderland Recap
- 4) Winter Wonderland 2023 Date
 - a. Dec. 3 or Dec. 10
- 5) Taste of Mequon Applications Update
- 6) Sponsorship Levels
- 7) Children's Area
- 8) 10th Anniversary Ideas
- 9) Next Meeting Date and Time: Feb. 15 - 6:30 P.M.
- 10) Adjourn

Dated: January 18, 2023

/s/ Vanessa Nerbun, Chair

Notice is hereby given that a quorum of other governmental bodies may be present at this meeting to present, discuss and/or gather information about a subject over which they have decision-making responsibility, although they will not take formal action thereto at this meeting.

Persons with disabilities requiring accommodations for attendance at this meeting should contact the City Clerk's Office at 262-236-2914, twenty-four (24) hours in advance of the meeting.

Any questions regarding this agenda may be directed to the City Administrator's Office at 262-236-2941, Monday through Friday, 8:00 AM – 4:30 PM



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FESTIVALS COMMITTEE
Wednesday, November 16, 2022
6:30 PM
North Conference Room

Minutes

1) Call to Order, Roll Call

Present:

Chair Vanessa Nerbun
 Committee Member Deanna Conaty
 Committee Member Jenne Hohn
 Committee Member Tracy Johnson
 Committee Member Christine McLean
 Vice Chair Miranda White
 Committee Member Lisa Liljegren -- **Absent**
 Committee Member Moshe Luchins -- **Absent**

Also Present: Executive Assistant Enea

2) Approval of Meeting Minutes

a. October Meeting Minutes

RESULT: **Approved by Voice Acclamation [Unanimous]**
MOVED BY: Member Conaty
SECONDED BY: Committee Member Hohn

AYES:	Nerbun, Conaty, Hohn, Johnson, McLean, White
ABSENT:	Liljegren, Luchins

3) Winter Wonderland Updates

The Committee was concerned that the street would be too dark, so agreed to rent two light towers (for north and south end) and to get lights around the bandshell. Kim Guibord will be contacted for sound/lighting services, trees and lights will be purchased to be placed by IDH, bathrooms at the front of City Hall will be used for festival guests, foldable chairs will be placed in front of the bandshell, DPW will make sure to have enough trash cans, the photo-op arch will be staked down, Committee member Johnson will bring a speaker, Committee member McLean will bring a fire pit, and a podium will be used at Santa check-in. Member assignments were

Attachment: Festival Minutes 111622 (8056 : November Meeting Minutes)

given for day of the festival: Vanessa, Tracy, and Miranda will be at the IDH for Santa check-in, Deanna will be at the wagon check-in, Christine will be at the ornament tent, Jenne will be at volunteer check-in/cookie tent, and Carrie & Lisa will be by the choirs. Committee members will be emailed when the flyers are ready for pick-up and available members will decorate the Isham Day House on Friday, December 9 during the day. The Committee then toured the Isham Day House and determined that pipe & drape needed to be ordered, as well as carpet mats.

4) Adjourn

Committee Member McLean moved to adjourn at 7:30 PM and Vice Chair White seconded.

Respectfully Submitted,

Carrie Enea
Executive Assistant



Saturday, September 9, 2023
NOON – 9:00 PM

FOOD/BEVERAGE VENDOR APPLICATION
Application Deadline: June 2, 2023

VENDOR INFORMATION

Name of Vendor/Business:

Name of Contact Person:

Phone # of Contact Person:

Address:

City/State/Zip:

Food Trucks: What window do you use to provide service?

(Required)

E-Mail:

(Required)

Name of Emergency Contact Person:

(Required)

Phone # Emergency Contact Person:

VENDOR SPACE FEE AND SPACE REQUIREMENT (✓ appropriate space size)

Space Size	Before June 2	Check Appropriate Box (✓)	After June 2	Check Appropriate Box (✓)
10 x 10	\$150		\$200	
10 x 20	\$250		\$300	
Food Truck	\$250		\$300	

Total Due \$ _____

Total Due \$ _____

The vendor space fee is non-refundable. Please make checks payable to: City of Mequon

➔ • **All vendors must be setup by 11:30 AM.**

ITEMS YOU WILL BE SELLING

List pre-packaged items:

Item(s) for Sale	✓
Food	
Wine	
Beer	

EVENT LICENSES

Temporary Restaurant License/Mobile Restaurant License (Food Trucks)

In order to participate, a current *Temporary Restaurant License* is required. For information on obtaining a temporary restaurant license, contact the Washington Ozaukee Public Health Department at:

Washington County Office
333 E. Washington Street, Suite 1100
West Bend, WI 53095
(262) 335-4462

Ozaukee County Office
121 W. Main Street
Room #246
Port Washington, WI 53074
(262) 284-8170

Washington or Ozaukee Counties Only

For vendors not traveling outside of Washington or Ozaukee Counties, contact the Washington Ozaukee County Public Health Department for a Temporary Food License.

Contact:

Mark Carlson R.E.H.S.
Environmental Health Specialist

Washington Ozaukee Public Health Department
121 Main Street Room 246
Port Washington, WI 53074
262.284.8170

Mark.Carlson@washozwi.gov
website: washozwi.gov

Vendors selling pre-packaged items to take home (such as jams, honey, baked goods, sauces, cheese) must provide proof of exemption for sale of pre-packaged non-potentially hazardous foods.

Liquor License/Bartender License

For information about obtaining a liquor and bartender license, please contact Mequon City Hall, City Clerk's office (262) 236-2914. **Deadline to apply for a liquor license/bartender license is Friday, June 9, 2023.**

City of Mequon ● 11333 N. Cedarburg Road ● Mequon, WI 53092

ELECTRICAL OUTLETS REQUIRED: (✓ required number of outlets)

In an effort to best accommodate the needs of all our food vendors it would be helpful for you to indicate the number of outlets necessary to run your operation. All outlets are 20 amps.

A maximum of three outlets will be available per vendor. Please select (✓) the number of outlets you will require below.

1 outlet	
2 outlets	
3 outlets	

Electricity is not available for food trucks in certain areas of the festival grounds. Food trucks should be prepared to use their own generator.

FIRE SAFETY INSPECTION

The Southern Ozaukee Fire Department will be inspecting all food vendors that are engaged in cooking operations. All vendors must pass a pre or day of Fire Safety Inspection to participate.

Mobile food preparation facilities such as "Food Trucks or Trailers" may contact Deputy Chief Kurt Zellmann for a pre-event inspection to prevent any day of event issues or answer any questions in advance.

Tent cooking operations (non-vehicle based) may also contact Deputy Chief Zellmann in advance of the event to discuss any operations and ensure pre-determined compliance with equipment, clearances and fire suppression requirements or equipment.

Deputy Chief Kurt Zellmann
kzellman@ci.mequon.wi.us
 Phone: 414-254-0369

COOKING EQUIPMENT

Indicate # of LP gas tanks you will use. _____

Will you be using a charcoal grill? Yes _____ No _____

APPLICATION CHECKLIST

Please review the list below to ensure you have all the required information before submitting the application. (✓)

- _____ Completed application
- _____ Check for space fee (payable to City of Mequon)
- _____ Certificate of Insurance
- _____ Completed S-240 Wisconsin Temporary Event Operator and Seller Information
- _____ Completed Release and Hold Harmless for Vendor Form
- _____ Copy of Temporary Restaurant License/Mobile Restaurant License (Food Truck)
- _____ A list of menu items

SEND COMPLETED APPLICATION AND FORMS TO:

Mequon City Hall
11333 N. Cedarburg Road
Mequon, WI 53092
Attn: Carrie Enea, Executive Assistant
Fax: 262-242-9819
E-Mail: cenea@ci.mequon.wi.us

Questions? Please call Carrie Enea, Mequon City Hall (262) 236-2941.

The undersigned applicant agrees:

- 1) To adhere to the ***Taste of Mequon*** guidelines as provided in the food/beverage vendor information.
- 2) To agree to bear all risk and expense for any loss, theft or damage to my personal property or injury to my person, regardless of cause.
- 3) I agree to be photographed or videotaped for promotional purposes.

I have read and agree to the ***Taste of Mequon*** event terms and conditions.

Signature: _____ Date: _____

For Office Use Only:

Date Application Received: _____ Date Vendor Space Fee Paid: _____

Date Release and Hold Harmless For Vendor-Participants Form Received: _____

Date Certificate of Insurance Received: _____ Date Form S-240 Received: _____

Date Copy of Temporary Restaurant License Received: _____

Emergency Information Recorded: _____

Approved: January 18, 2023



FOOD/BEVERAGE VENDOR GUIDELINES

• All vendors must be setup by 11:30 AM.

- A WI Seller's Permit Number is required from vendors selling a product(s).
- Electricity is limited to certain areas of the festival grounds. No private generators are allowed, unless previously authorized by the Mequon Festivals Committee.
- A fire safety inspection is required by the Southern Ozaukee Fire Department.
- Vendors must remain in booth space.
- Setup is between 9:00 AM – 11:30 AM on Cedarburg Road in front of Mequon City Hall. Setup is not permitted prior to 9:00 AM. Only one vehicle is allowed per vendor on the street for setup. A parking pass will be mailed two weeks prior to the event. Other detailed instructions for load-in and set-up will be emailed approximately one week prior to the event.
- Set-up must be completed by 11:30 AM and booths must be staffed from noon to event close at 9:00 PM.
- At conclusion of the event, all trash must be placed in containers provided and the space left in the same condition as it was prior to setup.
- No early breakdowns. Breakdown is after 9:00 PM.
- All vendors are responsible for liability within their space as well as any loss, theft or damage.
- Appropriate dress is required, shirts and footwear must be worn at all times.
- Vendors are responsible for their own insurance.
- All licenses must be posted within the vendor's booth during the event.

S-240 Wisconsin Temporary Event Operator and Seller Information

Sellers at Temporary Events

Wis. Stat. § 73.03(38) requires an operator of a temporary event to obtain information from sellers selling merchandise or services at a temporary event, including those whose sales may be exempt from sales tax.

Please complete the "Seller" portion of the enclosed Form S-240 Wisconsin Temporary Event Operator and Seller Information provided, sign and date the form and submit with the event application.

Certificate of Insurance

A valid and in-force **Certificate of Insurance** naming the City of Mequon as additionally insured and evidencing the following coverage must be provided with application in order to participate:

- General Liability in the minimum aggregate amount of \$1,000,000, **and on which certificate is listed the City of Mequon as an additional insured;**
- Automobile liability in the minimum aggregate coverage of \$1,000,000;
- Workers Compensation.

City of Mequon 11333 N. Cedarburg Road Mequon, WI 53092

What to Bring to the Event

To ensure a successful event setup, please refer to the *Taste of Mequon Food Vendor Checklist* provided with the application package.

- **Duct tape to secure electrical cords**
- Fire extinguisher
- Vendor must provide their own tent, table and chairs
- A clamp light with a fluorescent or LED blub for lighting and an extension cord for the light. Electricity will be provided for the light.
- Hand washing setup with hot water
- Paper toweling
- Gloves
- Hair restraints
- ➔ • **A 10 or 12 gauge extension cord for every outlet you will need. Length of cord (50' or 100') will depend on how far away you are located from an outlet. A common household extension cord is not acceptable.**

Inclement Weather

If inclement/severe weather is predicted for the day of the event, a cancellation announcement will be posted on the City of Mequon's website (www.ci.mequon.wi.us) by 6:00 AM on the morning of the event. To hear a recorded message of the event cancellation, call (262) 236-2941.

An alternate event date will not be provided due to inclement weather.

Approved: January 18, 2023



**Saturday, September 9, 2023
NOON – 9:00 PM**

NON-FOOD/BEVERAGE VENDOR APPLICATION
Application Deadline: June 2, 2023

VENDOR INFORMATION

Name of Vendor/Business:

Name of Contact Person:

Phone # of Contact Person:

Address:

City/State/Zip:

(Required)

E-Mail:

(Required)

Name of Emergency Contact Person:

(Required)

Phone # Emergency Contact Person:

VENDOR SPACE FEE AND SPACE REQUIREMENT (✓ appropriate space size)

Space Size	Before June 3	Check Appropriate Box (✓)	After June 3	Check Appropriate Box (✓)
10 x 10	\$125		\$175	
10 x 20	\$200		\$250	
Total Due \$			Total Due \$	

The vendor space fee is non-refundable. Please make check payable to: City of Mequon



- All vendors must be setup by 11:30 AM.**

LIST ITEMS YOU WILL BE SELLING OR ACTIVITY YOU WILL HAVE

PLEASE NOTE MEQUON FESTIVALS BUSINESS POLICY: Businesses/non-profit organizations that do not sell, provide festival-related goods/services, or an approved children's activity are required to pay \$200 toward the Committee's cost of a children's entertainer. Said entertainer shall share your tent, with the express purposes of promoting your business/organization and providing interactive entertainment for the festival.

ELECTRICAL OUTLETS REQUIRED: (✓ required number of outlets)

In an effort to best accommodate the needs of all our vendors it would be helpful for you to indicate the number of outlets necessary to run your operation. All outlets are 20 amps.

A maximum of three outlets will be available per vendor. Please select (✓) the number of outlets you will require below. The first outlet is complimentary, each additional is \$25.

1 outlet	
2 outlets	
3 outlets	

Electricity is not available within the library parking lot and only in certain areas along Cedarburg Road.

APPLICATION CHECKLIST

Please review the list below to ensure you have all of the required information before submitting the application. (✓)

- Completed application
- Check for space fee (payable to City of Mequon)
- Completed S-240 Wisconsin Temporary Event Operator and Seller Information
- Completed Release and Hold Harmless for Vendor Form
- Picture of Booth Set-up (First-time vendors only)

SEND COMPLETED APPLICATION AND FORMS TO:

Mequon City Hall
 11333 N. Cedarburg Road
 Mequon, WI 53092
 Attn: Carrie Enea, Executive Assistant
Fax: 262-242-9819
E-Mail: cenea@ci.mequon.wi.us

Questions? Please call Carrie Enea, Mequon City Hall (262) 236-2941

The undersigned applicant agrees:

- 1) To adhere to the ***Taste of Mequon*** guidelines as provided in the food/beverage vendor information.
- 2) To agree to bear all risk and expense for any loss, theft or damage to my personal property or injury to my person, regardless of cause.
- 3) I agree to be photographed or videotaped for promotional purposes.

I have read and agree to the ***Taste of Mequon*** event terms and conditions.

Signature: _____ Date: _____

Approved: January 21, 2022



NON-FOOD/BEVERAGE VENDOR GUIDELINES

➔ **All vendors must be setup by 11:30 AM.**

- A WI Seller's Permit Number is required from vendors selling a product(s).
- Electricity is limited to certain areas of the festival grounds. No private generators are allowed, unless previously authorized by the Mequon Festivals Committee.
- Vendors must remain in booth space.
- Setup is between 9:00 AM – 11:30 AM on Cedarburg Road in front of Mequon City Hall. Setup is not permitted prior to 9:00 AM. Only one vehicle is allowed per vendor on the street for setup. A parking pass will be mailed two weeks prior to the event. Other detailed instructions for load-in and set-up will be emailed approximately one week prior to the event.
- Setup must be completed by 11:30 AM and booths must be staffed from noon to event close at 9:00 PM.
- At conclusion of the event, all trash must be placed in containers provided and the space left in the same condition as it was prior to setup.
- All vendors are responsible for liability within their space as well as any loss, theft or damage. Vendors are responsible for their own insurance.
- Appropriate dress is required, shirts and footwear must be worn at all times.

S-240 Wisconsin Temporary Event Operator and Seller Information

Seller at Temporary Events

Wis. Stat. § 73.03(38) requires an operator of a temporary event to obtain information from sellers selling merchandise or services at a temporary event, including those whose sales may be exempt from sales tax.

Please complete the "Seller" portion of the enclosed Form S-240 Wisconsin Temporary Event Operator and Seller Information provided, sign and date the form and submit with the event application.

What to Bring to the Event

- **Duct tape to secure electrical cords**
- Vendor must provide their own tent, table and chairs
- A clamp light with a fluorescent or LED bulb for lighting and an extension cord for the light. Electricity will be provided for the light.
- ➔ **A 10 or 12 gauge extension cord for every outlet you will need. Length of cord (50' or 100') will depend on how far away you are located from an outlet. A common household extension cord is not acceptable.**

Inclement Weather

If inclement/severe weather is predicted for the day of the event, a cancellation announcement will be posted on the City of Mequon's website (www.ci.mequon.wi.us) by 6:00 AM on the morning of the event. To hear a recorded message of the event cancellation, call (262) 236-2941.

An alternate event date will not be provided due to inclement weather.

Approved: January 18, 2023

TASTE OF MEQUON

RELEASE AND HOLD HARMLESS FOR VENDOR-PARTICIPANTS

(FOR OTHER THAN FOOD AND BEVERAGE VENDORS)

THIS RELEASE AND HOLD HARMLESS ("Release") is made and entered into as of this _____ day of _____, 2022, by _____ ("Vendor Participant") and the **CITY OF MEQUON, WISCONSIN**, and their officers, employees and agents, (collectively, the "City").

RECITALS:

WHEREAS, the City will sponsor/co-sponsor a "Taste of Mequon" event (the "Event") to be conducted on **September 10, 2022** at the Civic Center Campus; and

WHEREAS, Vendor Participant desires to participate in the Event, in which it is contemplated Vendor Participant and other participants will set up booth facilities in which will be prepared and sold to members of the public-attendees arts, crafts and other authorized products and merchandise; and

NOW, THEREFORE, in consideration of the City agreeing to allow Vendor Participant to participate (which the City would not be willing to do so in the absence of the execution and delivery of this Agreement by Vendor Participant), and other good and valuable consideration, the receipt and sufficiency which are hereby acknowledged, Vendor Participant hereby agrees as follows:

1. **Recitals.** The recitals set forth above are true and correct and are by this reference incorporated herein.

2. **Acknowledgment and Assumption of Risk.** **VENDOR PARTICIPANT EXPRESSLY ACKNOWLEDGES THAT IN PERFORMING ANY OF THE ACTIVITIES SET FORTH ABOVE IN CONNECTION WITH THE EVENT, CERTAIN OF THE ACTIVITIES MAY OR MAY NOT BE INHERENTLY DANGEROUS AND WHICH ARE CAPABLE OF CAUSING PROPERTY DAMAGE AND BODILY INJURY TO VENDOR PARTICIPANT OR EMPLOYEES OR AGENTS OF VENDOR PARTICIPANT, OR ATTENDEES OF THE EVENT. VENDOR PARTICIPANT WILL BE RESPONSIBLE FOR ITS OWN WORKERS COMPENSATION AND LIABILITY INSURANCE INSURING FOR ANY RISK OF PROPERTY DAMAGE OR BODILY INJURY CAUSED BY OR DURING, ARISING OUT OF, OR RELATED TO VENDOR PARTICIPANT'S PARTICIPATION IN THE EVENT AND ANY OF THE ACTIVITIES CONDUCTED AT OR IN CONNECTION WITH THE EVENT.**

3. **Waiver and Hold Harmless.** **VENDOR PARTICIPANT DOES HEREBY COVENANT AND AGREE TO INDEMNIFY, RELEASE, WAIVE AND HOLD THE CITY, ITS OFFICERS, EMPLOYEES AND AGENTS (COLLECTIVELY, THE "INDEMNITEES") HARMLESS FROM AND AGAINST ANY AND ALL LOSSES, COSTS, LIABILITIES, PENALTIES, CLAIMS, DAMAGES, SUITS OR EXPENSES OF ANY KIND OR NATURE WHATSOEVER, INCLUDING, WITHOUT LIMITATION, REASONABLE ATTORNEYS' FEES (COLLECTIVELY, "LIABILITIES"), INCURRED**

OR SUSTAINED BY THE INDEMNITEES, DIRECTLY OR INDIRECTLY, AS A RESULT OF, ARISING OUT OF, CAUSED BY, OR RELATING IN ANY WAY TO VENDOR PARTICIPANT'S PREPARATION FOR PARTICIPATION IN THE EVENT, ACTUAL PARTICIPATION IN THE EVENT AND ACTIVITIES IN WHICH THE LIABILITIES SUSTAINED AROSE FROM, AND VENDOR PARTICIPANT'S PERFORMANCE OR OMISSION IN CONNECTION WITH ANY OF SUCH ACTIVITIES.

4. **Severability.** If any provision of this Release and Hold Harmless or any portion of any provision of this Release and Hold Harmless shall be deemed to be invalid, illegal or unenforceable, such invalidity, illegality or unenforceability shall not alter the remaining portion of such provision, or any other provision hereof, as each provision of this Release and Hold Harmless shall be deemed severable from all other provisions hereof.

5. **Governing Law.** This Release and Hold Harmless shall be governed by and be construed in accordance with the laws of the State of Wisconsin.

IN WITNESS WHEREOF, Vendor Participant has executed this Release and Hold Harmless on the date first above written. Vendor participant acknowledges receipt of a copy of this Release and Hold Harmless at the time of execution hereof.

VENDOR PARTICIPANT:

Business Name of Vendor Participant: _____

Signed by: _____

_____(Print name)

_____(Print Title)

Wisconsin Temporary Event Operator and Seller Information

Information on this form is required under sec. 73.03(38), Wis. Stats.

Instructions on reverse side.

E V E N T O P E R A T O R	PART A: Event Information: To be completed by the operator of the temporary event 1. Name of Temporary Event _____ 2. Date(s) of Temporary Event _____ 3. Location of Temporary Event (e.g., Venue, City) _____ PART B: Operator Information: To be completed by the operator of the temporary event 1. Name and Address _____ 2. Daytime Telephone Number () _____ 3. Email Address _____ 4. Wisconsin Tax Account Number _____ - _____ - _____ If blank, check appropriate box: ☐ No Taxable Sales ☐ Exempt under Occasional Sales Rule ☐ Exempt Nonprofit Organization ☐ Other – Explain: _____
	PART C: Seller Information: To be completed by seller and given to event operator on or before the first day of event. THIS IS NOT AN APPLICATION FOR A WISCONSIN TAX ACCOUNT – SEE INSTRUCTIONS 1. Legal Name _____ 2. Business Name _____ 3. Address (Street or Route) _____ 4. City, State and Zip Code _____ 5. Home Telephone Number () _____ Business Telephone Number () _____ 6. Wisconsin Tax Account Number _____ - _____ - _____ 7. Social Security Number X X X - X X - _____ 8. Federal Identification Number (FEIN) X X - X X X _____ 9. Check one box indicating the type of activity you intend to engage in at this event: ☐ Selling Taxable Merchandise or Service ☐ Selling Exempt Merchandise or Service ☐ Direct Sellers, Company Name _____ ☐ Display Only ☐ Exempt under Occasional Sales Rule ☐ Nonprofit Organization

I declare that the information on this form is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.

Print Name: _____

Signature: _____ Date: _____

Information about temporary events, including forms, instructions and Common Questions can be found on the Department of Revenue's website at revenue.wi.gov/html/temevent.html. If you have additional questions, please contact the Department of Revenue by email at DORBusinessTax@revenue.wi.gov or telephone at (608) 266-2776. See reverse side for submission instructions.

**** Do not email event reports to maintain confidentiality of seller information ****

Instructions for Completing Operator and Seller Information

EVENT OPERATOR:

An "operator" is defined as a person or entity (such as an individual, association, partnership, corporation, or non-profit organization) that arranges, organizes, promotes, or sponsors an event. An operator may also be referred to as an organizer, exhibitor, or decorator. An operator may or may not be the owner of the property or premises where the event takes place. An operator may also be a seller at the event.

Note: A Wisconsin tax account number (formerly seller's permit) is required if selling taxable merchandise or services. Admission fees are subject to sales tax in Wisconsin.

Step 1: Complete Parts A and B.

Step 2: Provide a copy of *Wisconsin Temporary Event Operator and Seller Information* (Form S-240) with Parts A and B completed to each seller participating in your event.

To obtain additional copies of Form S-240 go to the Department of Revenue's website at revenue.wi.gov/forms/sales/index.html. If you prefer, you may use the fill-in form available from the same website.

Step 3: Submission – Event Operator.

Submit compiled vendor information to the department as soon as possible but no later than 10 days from event closing using one of the following methods:

- **Electronic Reporting:** If you have all the required sellers' information, use the Excel spreadsheet provided at revenue.wi.gov/html/temevent.html. (Excel viewer is available.) Fill in the information for all sellers participating at the event and submit using the department's secure file transmission application at revenue.wi.gov/eserv/wteptran.html or by U.S. Mail. **Do not email event reports to maintain confidentiality of seller information.**
- **Paper Reporting:** Mail completed Forms S-240 or a printed version of spreadsheet to:

Temporary Events Program
Wisconsin Department of Revenue
PO Box 8910
Madison WI 53708-8910

Revenue Field Agents attend temporary events to verify registration of sellers. Sellers must have evidence of their Wisconsin tax account number at the event.

SELLER:

A "seller" is defined as a person or entity involved with selling merchandise or providing taxable services at a temporary event. A seller may also be referred to as a vendor, exhibitor, or booth owner.

Important: This form is not an application for a **Wisconsin Tax Account Number**. If you do not already have a tax account number but are required to, you will need to apply for one directly with the Department of Revenue prior to the event. You can apply online or download an application, *Application for Business Tax Registration* (Form BTR-101) on the department's website, revenue.wi.gov/forms/sales/index.html. Not all sellers are required to obtain a Wisconsin tax account number. Some of the reasons a seller may not need a tax account number are:

- The seller only sells tax-exempt items, such as vegetables for home consumption.
- The seller is only displaying at the event, no onsite orders are being taken, and taxable merchandise is not later shipped into Wisconsin.
- The seller qualifies for the occasional sale exemption. (See Publication 228, *Temporary Events*.)

If you have questions regarding applying for a Wisconsin tax account number, contact any Department of Revenue office, visit our website, or call (608) 266-2776.

Step 1: Complete Part C (event operator should complete Parts A and B).

Line 1: Enter your individual, partnership, association, or corporate name.

Line 2: Enter your business name, if different.

Line 3: Enter the address of the physical location of your business. If different, also provide your mailing address.

Line 6: Enter your 15-digit Wisconsin tax account number. You can find this number on your Form ST-12.

This number is **not** your 6-digit seller's permit number issued to you prior to December 31, 2002.

Lines 7 & 8: Enter the last four digits of your social security number and/or federal employer identification number. This is required under sec. 73.03(38), Wis. Stats., if you do not provide a tax account number.

Step 2: Submit completed form to event operator on or before the first day of the event.



Saturday, September 9, 2023
NOON – 9:00 PM

**ARTIST/CRAFTSMAN/FARMER'S MARKET
 JURY APPLICATION**

VENDOR INFORMATION

Name of Vendor/Business: _____

Name of Contact Person: _____

Phone # of Contact Person: _____

Address: _____

City/State/Zip: _____

(Required)

E-Mail: _____

(Required)

Name of Emergency Contact Person: _____

(Required)

Phone # Emergency Contact Person: _____

VENDOR SPACE FEE

SPACE REQUIREMENT: (✓ appropriate space size)

Space Size	Before June 2	Check Appropriate Box (✓)	After June 2	Check Appropriate Box (✓)
10 x 10	\$75		\$125	
10 x 20	\$125		\$175	

Total Due _____

Total Due _____

The vendor space fee is non-refundable.



- **All vendors must be setup by 11:30 AM.**

APPLICATION CHECKLIST

Please review the list below to ensure you have all the required information before submitting the application. (✓)

- _____ Completed application
- _____ Provide 3 pictures of items that applicant will be selling and 1 of booth space setup
- _____ Check for space fee (payable to City of Mequon)
- _____ Completed S-240 Wisconsin Temporary Event Operator and Seller Information
- _____ Completed Release and Hold Harmless for Vendor Form

SEND COMPLETED APPLICATION AND FORMS TO:

Mequon City Hall
11333 N. Cedarburg Road
Mequon, WI 53092
Attn: Carrie Enea, Executive Assistant
Fax: 262-242-9819
E-Mail: cenea@ci.mequon.wi.us

Questions? Please call Carrie Enea, Mequon City Hall (262) 236-2941. Applicant will receive an email within 14 business days of submittal if their application has been accepted.

The undersigned applicant agrees:

- 1) To adhere to the ***Taste of Mequon*** guidelines as provided in the artist/craftsman vendor information.
- 2) To agree to bear all risk and expense for any loss, theft or damage to my personal property or injury to my person, regardless of cause.
- 3) I agree to be photographed or videotaped for promotional purposes.

I have read and agree to the ***Taste of Mequon*** event terms and conditions.

Signature: _____ Date: _____

For Office Use Only:

Date Application Received: _____ Date Vendor Space Fee Paid: _____

Date Release and Hold Harmless For Vendor-Participants Form Received: _____

Date Form S-240 Wisconsin Temporary Event Operator and Seller Information Received: _____

Emergency Information Recorded: _____

Approved: January 18, 2023



ARTIST/CRAFTSMAN/FARMER'S MARKET VENDOR GUIDELINES

- Set up is between 9:00 AM – 11:30 AM on the day of the festival. Setup is not permitted prior to 9:00 AM. Only one vehicle is allowed per vendor on the street for setup. A parking pass will be mailed two weeks prior to the event. Other detailed instructions for load-in and set-up will be emailed approximately one week prior to the event.
- ➔ • **All vendors must be setup by 11:30 AM.**
- Booths must be staffed from noon to event close at 9:00 PM. At the conclusion of the event all trash must be placed in containers provided and the space left in the same condition as it was prior to setup.
- Vendors must provide their own tent, tables, and chairs. Appropriate dress is required, shirts and footwear must be worn at all times.
- All vendors are responsible for liability within their space as well as any loss, theft, or damage. Vendors are responsible for their own insurance.
- One electrical outlet is provided complimentary to all vendors (except children's area). Additional may be available for \$25/each. Please inquire if needed.
- Payment is due in full at time of application.

S-240 Wisconsin Temporary Event Operator and Seller Information

Sellers at Temporary Events

Wis. Stat. § 73.03(38) requires an operator of a temporary event to obtain information from sellers selling merchandise or services at a temporary event, including those whose sales may be exempt from sales tax.

Please complete the "Seller" portion of the enclosed Form S-240 Wisconsin Temporary Event Operator and Seller Information provided, sign and date the form and submit with the event application.

Inclement Weather

If inclement/severe weather is predicted for the day of the event, a cancellation announcement will be posted on the City of Mequon's website (www.ci.mequon.wi.us) by 6:00 AM on the morning of the event. To hear a recorded message of the event cancellation, call (262) 236-2941.

An alternate event date will not be provided due to inclement weather.

Approved: January 18, 2023

Wisconsin Temporary Event Operator and Seller Information

Information on this form is required under sec. 73.03(38), Wis. Stats.

Instructions on reverse side.

E V E N T O P E R A T O R	PART A: Event Information: To be completed by the operator of the temporary event 1. Name of Temporary Event _____ 2. Date(s) of Temporary Event _____ 3. Location of Temporary Event (e.g., Venue, City) _____ PART B: Operator Information: To be completed by the operator of the temporary event 1. Name and Address _____ 2. Daytime Telephone Number () _____ 3. Email Address _____ 4. Wisconsin Tax Account Number _____ - _____ - _____ If blank, check appropriate box: ☐ No Taxable Sales ☐ Exempt under Occasional Sales Rule ☐ Exempt Nonprofit Organization ☐ Other – Explain: _____
	PART C: Seller Information: To be completed by seller and given to event operator on or before the first day of event. THIS IS NOT AN APPLICATION FOR A WISCONSIN TAX ACCOUNT – SEE INSTRUCTIONS 1. Legal Name _____ 2. Business Name _____ 3. Address (Street or Route) _____ 4. City, State and Zip Code _____ 5. Home Telephone Number () _____ Business Telephone Number () _____ 6. Wisconsin Tax Account Number _____ - _____ - _____ 7. Social Security Number X X X - X X - _____ 8. Federal Identification Number (FEIN) X X - X X X _____ 9. Check one box indicating the type of activity you intend to engage in at this event: ☐ Selling Taxable Merchandise or Service ☐ Selling Exempt Merchandise or Service ☐ Direct Sellers, Company Name _____ ☐ Display Only ☐ Exempt under Occasional Sales Rule ☐ Nonprofit Organization

I declare that the information on this form is true and correct to the best of my knowledge and belief and that I am authorized to sign this form.

Print Name: _____

Signature: _____ Date: _____

Information about temporary events, including forms, instructions and Common Questions can be found on the Department of Revenue's website at revenue.wi.gov/html/temevent.html. If you have additional questions, please contact the Department of Revenue by email at DORBusinessTax@revenue.wi.gov or telephone at (608) 266-2776. See reverse side for submission instructions.

**** Do not email event reports to maintain confidentiality of seller information ****

Instructions for Completing Operator and Seller Information

EVENT OPERATOR:

An "operator" is defined as a person or entity (such as an individual, association, partnership, corporation, or non-profit organization) that arranges, organizes, promotes, or sponsors an event. An operator may also be referred to as an organizer, exhibitor, or decorator. An operator may or may not be the owner of the property or premises where the event takes place. An operator may also be a seller at the event.

Note: A Wisconsin tax account number (formerly seller's permit) is required if selling taxable merchandise or services. Admission fees are subject to sales tax in Wisconsin.

Step 1: Complete Parts A and B.

Step 2: Provide a copy of *Wisconsin Temporary Event Operator and Seller Information* (Form S-240) with Parts A and B completed to each seller participating in your event.

To obtain additional copies of Form S-240 go to the Department of Revenue's website at revenue.wi.gov/forms/sales/index.html. If you prefer, you may use the fill-in form available from the same website.

Step 3: Submission – Event Operator.

Submit compiled vendor information to the department as soon as possible but no later than 10 days from event closing using one of the following methods:

- **Electronic Reporting:** If you have all the required sellers' information, use the Excel spreadsheet provided at revenue.wi.gov/html/temevent.html. (Excel viewer is available.) Fill in the information for all sellers participating at the event and submit using the department's secure file transmission application at revenue.wi.gov/eserv/wteptran.html or by U.S. Mail. **Do not email event reports to maintain confidentiality of seller information.**
- **Paper Reporting:** Mail completed Forms S-240 or a printed version of spreadsheet to:

Temporary Events Program
Wisconsin Department of Revenue
PO Box 8910
Madison WI 53708-8910

Revenue Field Agents attend temporary events to verify registration of sellers. Sellers must have evidence of their Wisconsin tax account number at the event.

SELLER:

A "seller" is defined as a person or entity involved with selling merchandise or providing taxable services at a temporary event. A seller may also be referred to as a vendor, exhibitor, or booth owner.

Important: This form is not an application for a **Wisconsin Tax Account Number**. If you do not already have a tax account number but are required to, you will need to apply for one directly with the Department of Revenue prior to the event. You can apply online or download an application, *Application for Business Tax Registration* (Form BTR-101) on the department's website, revenue.wi.gov/forms/sales/index.html. Not all sellers are required to obtain a Wisconsin tax account number. Some of the reasons a seller may not need a tax account number are:

- The seller only sells tax-exempt items, such as vegetables for home consumption.
- The seller is only displaying at the event, no onsite orders are being taken, and taxable merchandise is not later shipped into Wisconsin.
- The seller qualifies for the occasional sale exemption. (See Publication 228, *Temporary Events*.)

If you have questions regarding applying for a Wisconsin tax account number, contact any Department of Revenue office, visit our website, or call (608) 266-2776.

Step 1: Complete Part C (event operator should complete Parts A and B).

Line 1: Enter your individual, partnership, association, or corporate name.

Line 2: Enter your business name, if different.

Line 3: Enter the address of the physical location of your business. If different, also provide your mailing address.

Line 6: Enter your 15-digit Wisconsin tax account number. You can find this number on your Form ST-12.

This number is **not** your 6-digit seller's permit number issued to you prior to December 31, 2002.

Lines 7 & 8: Enter the last four digits of your social security number and/or federal employer identification number. This is required under sec. 73.03(38), Wis. Stats., if you do not provide a tax account number.

Step 2: Submit completed form to event operator on or before the first day of the event.



February 1, 2023

Name
Company Name
Address
Mequon, WI 53092

Dear Taste of Mequon Sponsor;

We are writing to invite you to join us as a proud partner of Taste of Mequon. This year we are celebrating our 10th anniversary.

Taste of Mequon has proven to be an excellent avenue for helping build a greater sense of community among residents and business owners and highlighting why Mequon is rated as one of the best cities in Wisconsin to live, work and play.

Taste of Mequon is scheduled for Saturday, September 9, 2023 from Noon – 9:00 P.M. As a sponsor, you will receive recognition in a variety of ways which are outlined on the following materials.

The community response has been impressive with the attendance growing significantly each of the past nine years. This is a great opportunity to provide your business with valuable exposure while also demonstrating that you are passionate about the community of Mequon.

We encourage you to visit our website at <https://www.mequonfestivals.org> for additional photos and to see where we will be posting this year's festival information.

Very truly yours,

Vanessa Nerbun
Chair, Festivals Committee
Vbrown11@hotmail.com
262-225-5236

Miranda White
Vice Chair, Festivals Committee
Mjwhite0011@gmail.com
224-730-4788

Attachment: Sponsor Package 2023 (8060 : Sponsorship Letter and Levels)



LEVELS OF SPONSORSHIP

Please check the level of your sponsorship below and submit form along with a check made payable to City of Mequon to the address below.

PACKAGES					
	250	500	1,000	1,750	3,500
Acknowledgment in web-based marketing	x	x	x	x	x
Acknowledgement in City of Mequon electronic newsletter (s)	x	x	x	x	x
Organization's name acknowledged in press releases		x	x	x	x
Organization's name acknowledged in letters to editor		x	x	x	x
Name acknowledgement in all print; flyers, posters and other print material.			x	x	x
Name on each main event banner			x	x	x
Logo acknowledgement in all print; flyers, posters, and other print material.			x	x	x
Logo on each main event banner			x	x	x
Recognition for a children's area entertainer/activity				x	x
Individual Event Banner				x	x
Main Stage Signage					x

Business Name:

Address:

City:

State:

Zip Code:

Phone Number:

Email:

List name as you would like it to appear in all media print:

Package Levels

_____ \$3,500

_____ \$1,750

_____ \$1,000

_____ \$500

_____ \$250

_____ Other

Please mail form and check to:

Mequon City Hall, 11333 N. Cedarburg Road, Mequon WI 53092 no later than **July 15, 2023** to be included in Taste of Mequon collateral and print materials.

For sponsors of \$500 and above e-mail your company's logo to: cenea@ci.mequon.wi.us

*Please note: name/business listing on collateral materials are subject to print deadlines. Taste of Mequon sponsorship must be confirmed no later than **July 15, 2023**.