



APPLICATION FOR PARTICIPATION

Individual's Full Name: _____
Last Name First Name MI

Home Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email address: _____

Georgia Retail Seller's Permit # _____

Business Address: (if different than home address)

City: _____ State: _____ Zip: _____

Business Category (Circle One): Handmade Food Plants/Flowers Vintage Art

Business Website: _____ Business Social Account (handle): _____

Merchandise/Service Description: _____

PERMIT: If you are selling an ingestible product (i.e. pre-packed food), please provide a copy of your **cottage license or commercial kitchen license** with this application.

No food cooked on premise can be sold at this event.

INSURANCE (All insurance must meet the requirements attached in the packet)

_____ I have attached my annual insurance certificate with application following the requirements for additionally insured on the following page.

I certify that the information provided above is true and correct to the best of my knowledge; and I hereby agree to comply with each and all of the Macon Coliseum - Spectra Venue Management, and the terms and conditions of the vendor space permit. Please return form to marina.Jaramillo@spectrarp.com

Signature

Date

**Macon Centreplex Coliseum
Seller Insurance Requirements**

All Permittees (Vendors) shall provide evidence of insurance protecting the legal liability of Macon-Bibb County, Global Spectrum, L.P. d/b/a Spectra Venue Management and all of their agents, employees, representatives, and affiliates from occurrences as to bodily injury liability, property damage liability, personal injury liability, and contractual liability which are limited to the operations of the Permittee.

- I. The Permittee shall provide Global Spectrum, L.P. d/b/a Spectra Venue Management with an original certificate of insurance, lawfully transacted, which sets forth the following information:
 - A. Insurance requirements for individual vendors:
 1. **\$1,000,000 per occurrence/\$1,000,000 general aggregate annually** (where an aggregate limit is applicable to the policy), for all hazards (including contractual liability and completed operations), for all damages caused by personal injury, bodily injury, and property damage. **\$1,000,000 per occurrence/\$1,000,000 aggregate per specialty vendor** for all damages caused by personal injury, bodily injury, property damage, including products and contractual liability.
 2. **The individual vendor must be a “Named Insured” under the policy.**
 3. The vendor’s insurance must list “Macon-Bibb County, Global Spectrum, L.P. d/b/a Spectra Venue Management and all of their agents, employees, representatives, and affiliates.” as “Additionally Insured” with respect to the Named Insured’s operations at the Macon Coliseum, 200 Coliseum Drive, Macon, GA. 31217.
 4. The vendor’s insurer must be rated by the A.M. Best Company, and hold a rating of at least “B+” in the financial category VI or higher.
 5. **The vendor’s policy must state that it will be primary, and not contributory, with any insurance purchased by Global Spectrum, L.P. d/b/a Spectra Venue Management for its own operations.**
 6. The vendor’s policy must cover all negligent acts of the vendor’s occurring as a result of their operations at the Global Spectrum, L.P. d/b/a Spectra Venue Management. No limitations will be accepted.
- II. **IN ADDITION, Global Spectrum, L.P. d/b/a Spectra Venue Management IN ITS SOLE DISCRETION MAY REQUIRE HIGHER LIMITS AND/OR ADDITIONAL COVERAGE FOR SUCH ACTIVITIES AS IT MAY DEEM NECESSARY.**