





Vendor Application: 2025 Black History Month Celebration

Business Information

Business Name

Contact Name

Phone

Email

Business Address 1

Business Address 2

City

State

Zip

How will the items you sell/distribute enhance the spirit and character of the event?

Vehicle & Driver Information

Will your vehicle fit in the V-Lot? (Must be 6ft, 6in or lower in height)

Yes

No

Will you need oversize vehicle parking in P-1N Lot? (For vehicles 6 ft, 6in or higher)

Yes

No

Driver 1 Name (exactly as it appears on license)

Driver's License: Issued State & Number

License Plate: Issued State & Number

Driver 2 Name (exactly as it appears on license)

Driver's License: Issued State & Number

License Plate: Issued State & Number

Permit Agreement

The Permit Agreement, including the completed Notary Page, photos of booth and signs and insurance requirements, is REQUIRED and must be attached with the Vendor Application.

- Download the Agreement: https://empirestateplaza.ny.gov/permit-agreement
The Agreement is not applicable for NYS Agencies.
Vendors wishing to apply for an insurance waiver must meet the terms outlined in Item 12 of the Permit Agreement.

My permit agreement is already on file

My permit agreement is included with this vendor application

Please include any additional information or questions in the space below:

Continue to Event Selection & Payment



Select Dates and Space Options			
<b>ONLY February 5, 2025</b>	<b>Cost</b>	<b>Select ✓ and Enter Quantity &amp; Total \$</b>	
<b>Basic Commercial Booth:</b> 10' x 15' space includes 2 tables, 2 chairs, access to 110v electrical power, 1 parking space ( <i>arts, crafts, merchandise, packaged food products</i> )	\$70	→ Qty	Total \$
<b>Additional Space:</b> Additional 15' with 1 additional table (must be in conjunction and adjacent to basic booth space)	\$60	→ Qty	Total \$
<b>Basic Not-for-Profit Booth Space:</b> 10' x 15' space includes 2 tables, 2 chairs, access to 110v electrical power, 1 parking space ( <i>arts, crafts, fund-raising items</i> )	\$40	→ Qty	Total \$
<b>Additional Parking</b>	\$10	→ Qty	Total \$
<b>Additional Tables</b> (no charge)	\$0	→ Qty	
<b>Additional Chairs</b> (no charge)	\$0	→ Qty	
<b>ONLY February 19, 2025</b>	<b>Cost</b>	<b>Select ✓ and Enter Quantity &amp; Total \$</b>	
<b>Basic Commercial Booth:</b> 10' x 15' space includes 2 tables, 2 chairs, access to 110v electrical power, 1 parking space ( <i>arts, crafts, merchandise, packaged food products</i> )	\$70	→ Qty	Total \$
<b>Additional Space:</b> Additional 15' with 1 additional table (must be in conjunction and adjacent to basic booth space)	\$60	→ Qty	Total \$
<b>Basic Not-for-Profit Booth Space:</b> 10' x 15' space includes 2 tables, 2 chairs, access to 110v electrical power, 1 parking space ( <i>arts, crafts, fund-raising items</i> )	\$40	→ Qty	Total \$
<b>Additional Parking</b>	\$10	→ Qty	Total \$
<b>Additional Tables</b> (no charge)	\$0	→ Qty	
<b>Additional Chairs</b> (no charge)	\$0	→ Qty	
<b>BOTH February 5 and 19, 2025</b>	<b>Cost</b>	<b>Select ✓ and Enter Quantity &amp; Total \$</b>	
<b>Basic Commercial Booth:</b> 10' x 15' space includes 2 tables, 2 chairs, access to 110v electrical power, 1 parking space ( <i>arts, crafts, merchandise, packaged food products</i> )	\$140	→ Qty	Total \$
<b>Additional Space:</b> Additional 15' with 1 additional table (must be in conjunction and adjacent to basic booth space)	\$120	→ Qty	Total \$
<b>Basic Not-for-Profit Booth Space:</b> 10' x 15' space includes 2 tables, 2 chairs, access to 110v electrical power, 1 parking space ( <i>arts, crafts, fund-raising items</i> )	\$80	→ Qty	Total \$
<b>Additional Parking</b>	\$20	→ Qty	Total \$
<b>Additional Tables</b> (no charge)	\$0	→ Qty	
<b>Additional Chairs</b> (no charge)	\$0	→ Qty	
		<b>Total Due With Application: \$</b>	

Please make checks or money orders payable to:

NYS Office of General Services

Return completed Vendor Application, Permit Agreement and Payment to:

[diane.hems@ogs.ny.gov](mailto:diane.hems@ogs.ny.gov)



## Credit Card Form

**Instructions:** To pay with your credit card, please complete and return this form with your application.

Card Information			
Card Type		Business Name	
AMEX	Discover	MasterCard	VISA
Cardholder First Name		Cardholder Last Name	
Credit Card Number (XXXX-XXXX-XXXX-XXXX)		Expiration Date	CVV2
-	-	-	Billing Zip Code
Charge Authorization			
I hereby authorize the Office of General Services to charge the following amount for the event indicated below.			
Event Name		Authorized Amount	
		\$	
Name (Print)		Date	
Signature*			
_____			

\*The signature section must be completed. Electronic signatures are not accepted.

For Office Use Only		
Invoice #	Program	Received By