



## Saturday, December 7, 2024

Celebrate the holiday season in beautiful DOWNTOWN IMLAY CITY with fun for everyone. Kringle Market shopping with food truck vendors, kids craft stations located throughout town, Lunch with Santa (reservations required), warming stations with hot cocoa & smores, lighted holiday parade, tree lighting ceremony and more!

### Kringle Market Vendor Application

The Imlay City DDA is looking for crafters, artisans and direct sale vendors for our holiday giftable market.

**Details:**

- WHEN: The DDA Kringle Market takes place on Saturday, December 7, 2024 in downtown Imlay City from 10 am - 4 pm.
- WHERE: Old Fire Hall, 338 E. Third Street, Imlay City 48444 and Lambstele Building (Senior Center) 395 E. Third Street, Imlay City.
- Vendor spaces will each be approximately 8x8.
- Price per 8x8 space is \$25.00 / with electrical outlet \$30.00 (must be pre-paid – space is limited and on first come-first serve basis). Registration fee may be paid via credit card over phone to the event manager (810-724-2135 ext. 1312) or by check made payable to the Imlay City DDA and mailed to 150 N. Main, Imlay City, MI 48444.
- **\*ALL applications must be reviewed and approved by the event manager before payment will be taken.**
- As a courtesy during the event, the Imlay City DDA will accept payments via debit/credit on behalf of vendors who do not have their own merchant processing account. Funds will then be returned to vendor in form of check the following week.
- Set up beginning at 8:00 am (or the day before with pre-approval). It is the responsibility of the vendor to set up, maintain and monitor their space during the event.
- Vendors must be present for entire duration of event.
- Please direct any questions to Chris Bishop Market Manager @ ddapromotions@imlaycity.org.

### Kringle Market — Request to Participate Form

*Please submit at least 3 photos of your products with your application for vendor approval.*

NAME \_\_\_\_\_ TEL \_\_\_\_\_

EMAIL \_\_\_\_\_ Facebook Address: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PLEASE DESCRIBE WHAT YOU WILL BE BRINGING TO OUR KRINGLE MARKET \_\_\_\_\_

**2024 Kringle Market**  
**Agreement of Compliance /**  
**Waiver of Responsibility / Media Waiver**

I, \_\_\_\_\_, have read and fully understand the Imlay City Downtown Development Authority Market Rules & Regulations. I hereby agree to comply with these rules and regulations, as well as all other federal, state, and local regulations that apply, knowing full well that I will forfeit my right to sell at the Imlay City Downtown Development Authority Kringle Market if I am found to be in noncompliance.

I, \_\_\_\_\_, accept the responsibility of the use of the Market Facility. I will compensate the City of Imlay City for damages that may occur to the facility while in my use. The City of Imlay City will not be held responsible for accidents or injuries sustained by myself (vendor) and / or my associates while using the Market Facility. I, the vendor, will not hold the City of Imlay City responsible for any damages or harm to my employees, products, or equipment that may occur while using the Market Facility.

I, \_\_\_\_\_, understand that images of myself, my employees, and / or my products may be used in promotional efforts by the Imlay City Downtown Development Authority and Market Manager, which may include, but are not limited to, social media, websites, and printed media.

**Printed Name:** \_\_\_\_\_

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

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

Do you have Liability Insurance?

\_\_\_\_\_ No, I do not have liability insurance. *Completely fill out the sole proprietor form (attached)*

\_\_\_\_\_ Yes, I have liability insurance. (HIGHLY RECOMMENDED) *Provide a copy for our records*

## **Product Display**

- a. Vendors are encouraged to display their products attractively and keep with the character of the market. Vendors are encouraged to display the prices of their goods.
- b. Vendors using a canopy / shelter must have it anchored. Stakes will not be allowed on pavement and / or asphalt for anchoring purposes. It is recommended to use sandbags and / or cement blocks.
- c. Vendors must provide their table(s).
- d. Food items must be displayed on a table, not on the ground.
- e. All vendors must comply with state and local guidelines for handling and storing food. Pre-packaged and prepared items must comply with current labeling laws. (See Michigan's Cottage Food Law)
- f. Food sampling must be done with adherence to MDA and Health Department Requirements. All vendors offering food samples must realize responsibility for the safety of the food samples being offered. The vendors offering samples must take precautions to make certain that food samples are handled and displayed properly to prevent contamination.
- g. Vendor displays must not exceed the boundaries of their assigned stall.
- h. No obstacles may be placed in front of a stall that would present a hazard to others.
- i. Vendor signage should be attractive, readable, in good condition, and keep with the character of the market.
- j. Non-potable water and electricity are available on-site, but use must be preapproved by the Market Manager.

## **Vendor Performance**

- a. Vendors must keep their stalls maintained in a clean and sanitary condition. All boxes, bags, containers, and debris must be removed by the vendor and shall not be left on-site at the end of the day. Trash receptacles, maintained by the City, are meant for the disposal of small articles of waste and are provided for customers only.
- b. Vendors are expected to act professionally and courteously with customers, other vendors, and City staff. Discourtesy to patrons or other vendors, obscene language, shouting, or hawking of wares will not be tolerated.
- c. Vendors and / or their agents and employees shall not disparage, demean, or make negative comments about – in any form or fashion – other vendors and their products or stall setup, market staff, or the market itself. Conduct meant to harm someone's reputation and / or business will not be tolerated. This includes all social media outlets.
- d. All complaints and / or concerns, whether from vendors or customers, should be reported to the Market Manager and submitted in writing.
- e. Vendors shall not engage in disruptive conduct. Any disagreement between vendors shall be handled respectfully and professionally away from stalls and customers.
- f. Vendors are not permitted to play music that can be heard beyond their stall boundaries.
- g. Vendors with children (under the age of 16) accompanying them to the market must have a second adult present to care for the children. Children must be supervised at all times and remain within the assigned stall.
- h. All vendors are subject to federal, state, and county laws, including those governing health, sanitation, sales tax, packaging, labeling, weights, and measurements. Vendors must comply with all rules applicable to the products they sell, such as having necessary food processing labels.
- i. Participating vendors are strongly encouraged to carry liability insurance for their market business.

- j. Imlay City Downtown Development Authority, City of Imlay City, and Imlay City Market are not responsible for the loss, theft, or damage to any vendors' merchandise, products, equipment, materials, or personal belongings.
- k. Vendors who leave their stall unattended for any amount of time do so at their own risk.
- l. Smoking is prohibited in the market area.
- m. Vendors are not permitted to bring animals to the market.
- n. Vendors must agree to hold harmless from legal or financial liability Imlay City Downtown Development Authority, City of Imlay City, and Imlay City Market.
- o. Failure to follow policies, regulations, and decisions of the ICFM and the City of Imlay City will result in immediate and permanent removal from the market with no refund.

### **Enforcement of Rules**

- a. Market vendors must always conform to the market rules. Failure to follow policies, regulations, and decisions of the ICFM and the City of Imlay City will result in immediate and permanent removal from the market with no refund.
- b. All fees are non-refundable, even if the vendor does not attend a scheduled market day, the market is canceled due to inclement weather or any other reason, or if the market closes early due to inclement weather or any other unforeseen emergency.
- c. The DDA Director has the right to amend these Rules & Regulations if necessary.
- d. Failure to follow policies, regulations, and decisions of the ICFM and the City of Imlay City will result in immediate and permanent removal from the market with no refund.

### **Market Manager Responsibilities**

The Market Manager is there to perform all related duties to maintain and operate the market in the best interest of the City of Imlay City, the public, and the market vendors:

- a. Enforces the days and hours of operation.
- b. Makes the call to cancel or close early.
- c. Assigns vendor stalls and coordinates set-up.
- d. Collects rental fees and data from all vendors, maintains records and accounts, and coordinates financial activities and payouts with the City of Imlay City's bookkeeper and treasurer.
- e. Directs the distribution / arrangement of all vehicles on the market premises or grounds.
- f. Upon closing, inspect stalls to ensure vendors have appropriately left their area.
- g. Verifies all local, state, and federal laws are observed, all licenses and permits are valid and current for each vendor, and maintain files the same.
- h. Locates new vendors as stalls are available to provide a variety and plenty of products available to the public.
- i. Makes decisions to approve or negate which vendors / products participate.
- j. Informs vendors of any violation of the rules and regulations.
- k. Enforces the rules and regulations.

**CITY OF IMLAY CITY  
SOLE PROPRIETOR FORM  
For Sole Proprietor's with No Employees**

For workers' compensation purposes we are required to maintain verification regarding workers' compensation coverage for all of our independent contractors.

You must provide the following information if you:

- a) Are a sole proprietor with no employees, and
- b) Do not carry workers' compensation insurance.

- 1) Name of Sole Proprietor: \_\_\_\_\_
- 2) Federal Tax Identification Number or last 4 digits of Social Security No: \_\_\_\_\_
- 3) I am doing business as: \_\_\_\_\_

Please attach one of the following:

- A copy of the assumed name certificate you filed with the county; or
- Your business card; or
- A copy of your advertisement (Yellow Pages, Newspaper, etc.); or
- List one other business or private homeowner that you have worked for during the period of July 1, through current date, including the name and address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please complete the following statement:

I, \_\_\_\_\_, a Sole Proprietor with no employees will provide \_\_\_\_\_ services to \_\_\_\_\_ on a periodic basis. I do understand that I am not entitled to workers' compensation benefits under Michigan's Law, therefore, I am personally responsible for any injuries/illnesses I may sustain while performing my services to said entity.

Dated at: \_\_\_\_\_, on this \_\_\_\_\_ day of \_\_\_\_\_.

Signed: \_\_\_\_\_

Sole Proprietor

STATE OF MICHIGAN, COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ before me personally appeared \_\_\_\_\_, who being duly sworn did state the she/he is not entitled to workers' compensation benefits as indicated under Michigan's Law, and will not hold responsible the above named entity she/he may provide services to for any injury(ies) illness(es) she/he may sustain while performing such indicated services.

Seal/Stamp

\_\_\_\_\_  
Notary Public, \_\_\_\_\_ County  
My Commission expires \_\_\_\_\_

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

<b>Part I Taxpayer Identification Number (TIN)</b>																			
Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.																			
	<table border="1" style="margin: auto;"> <tr><td colspan="9" style="text-align: center;">Social security number</td></tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	Social security number																	
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<b>Note.</b> If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.																			
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<b>Part II Certification</b>	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. citizen or other U.S. person (defined below), and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
<b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.	

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** The IRS has created a page on IRS.gov for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.