

**SOUTH CAROLINA STATE FAIR
CONCESSION APPLICATION FOR OUTSIDE SPACE**

OCTOBER 9-20, 2024

Complete and email to brents@scstatefair.org

TELEPHONE: 803-799-3387 — FAX: 803-799-1760 — WEB SITE: www.scstatefair.org

Name of Business: _____

Name & Title of Applicant: _____

Email: _____ Phone: _____ Cell Phone: _____

Address: _____

Street/Box

City

State

Zip

List name(s) of all persons, distributors, or companies having an ownership/interest in this exhibit or concession: _____

TYPE OF EXHIBIT: (Check One)

____ Direct Sales: Space used for the purpose of selling merchandise or service.

____ Food Concession: Space used to sell food & certain beverages.

A COLOR PHOTOGRAPH OF THE CONCESSION IS REQUIRED. SPACE WILL BE ASSIGNED AT THE DISCRETION OF THE FAIR MANAGEMENT BASED ON APPEARANCE OF CONCESSION, PRODUCT MIX OF TOTAL OF ALL CONCESSIONS, AND AVAILABILITY.

If space is not available, do you wish to be placed on this year's waiting list? Yes _____ No _____

Size of total space needed: Width: _____ Depth: _____ (Include space for awning, door openings, etc. We prefer detachable hitches)

What electrical requirements are requested at each location: Watts: _____ Voltage: _____ Phase: _____

Holding Tank Capacity: _____ Location of Space: _____

Brief description of display: _____

Product(s) to be sold (beer, wine, liquor, and non-alcoholic beer are not permitted): _____

Proposed prices of product(s): \$ _____

Have you had space at a previous SC State Fair? If yes, under what name? _____

LIST THREE BUSINESS OR FAIR REFERENCES: (Please include address and phone number)

1. _____
2. _____
3. _____

I certify, to the best of my knowledge, that the above information stated in this application form is complete and true.

Signed _____ Date _____