



FOOD VENDOR ELECTRICAL NEEDS

Vendor Name _____

Name of person submitting information: _____

Since electrical needs always seem to pose a problem, we are asking that you help us to help you. Please complete this form listing all appliances and lighting you intend to use. If you choose to add to this list later, you must submit a written request indicating any additional needs.

Please list **ALL** appliances and lighting that you plan to use:

Appliance #1	Voltage	Wattage
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_____	_____	_____
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Description/Additional info: _____

Appliance # 2	Voltage	Wattage
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_____	_____	_____
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Description/Additional info: _____

Appliance #3	Voltage	Wattage
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_____	_____	_____
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Description/Additional info: _____

Appliance #4	Voltage	Wattage
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_____	_____	_____
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Description/Additional info: _____

Appliance #5	Voltage	Wattage
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_____	_____	_____
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Description/Additional info: _____

The Brown County Fair Association reserves the right to limit the amount of electrical usage.