



# FINGERLAKES MALL

## VENDOR/CRAFTER GENERAL APPLICATION

(This application is valid through December 31, 2023)

*Applications must be received in their entirety along with payment. They are reviewed and assigned spaces in the order they are received. Please write clearly and neatly. Feel free to attach any additional information to the packet.*

### CONTACT PERSON

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Product(s) being sold: \_\_\_\_\_

### BUSINESS/ORGANIZATION *(if applicable)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Describe the organization: \_\_\_\_\_

Are you a non-profit organization recognized by the Internal Revenue Service (Code #501c)? **Yes** or **No**

### DATE REQUESTED

Date(s): \_\_\_\_\_

Time(s):      Monday through Saturday → 10am to 4pm      Sunday → 11am to 4pm

### RENTAL FEES *(You may bring your own equipment at no charge.)*

10'X10' space rental:      \_\_\_\_\_ @\$25 each **per day** (free for non-profit)      \$ \_\_\_\_\_

Number of tables:      \_\_\_\_\_ @\$8 each **per day** (non-profit: 1 free then ½ price)      \$ \_\_\_\_\_

Number of chairs:      \_\_\_\_\_ @\$1 each **per day** (non-profit: 2 free then ½ price)      \$ \_\_\_\_\_

Electricity:      \_\_\_\_\_ @\$5 **per day** (free for non-profit)      \$ \_\_\_\_\_

**\*Payment can be made by Check or Money Order payable to Fingerlakes Mall. Total due:**      \$ \_\_\_\_\_

**Do you have racks, free-standing displays, or anything other than a standard table?**      YES      NO

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Other notes or important information: \_\_\_\_\_

\_\_\_\_\_

\*Applications can be:

**Mailed to:** Fingerlakes Mall PO Box 7128, Auburn, NY 13022

**Hand-delivered to:** Fingerlakes Mall Office 1579 Clark Street Road, Auburn, NY 13022

**Emailed to:** Elizabeth at Marketing@FingerlakesMall.com

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If you have any questions, please contact Elizabeth at 315-255-1188 or Marketing@FingerlakesMall.com.

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(For office use only)

Date packet received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Notes: \_\_\_\_\_

Payment received: \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount: \$ \_\_\_\_\_      Check      Money Order

(January 2023)

## **FINGERLAKES MALL VENDOR TABLE RULES & REGULATIONS**

If a vendor is found in violation of any of these policies, Fingerlakes Mall Management reserves the right to terminate this agreement.

1. Your space will be used for the sole purpose of displaying/selling only items listed in the vendor application.
2. Vendors are not allowed to intercept shoppers in any way, such as calling out or physically stopping them. No hawking, peddling, or other selling is allowed outside of your assigned area.
3. If you are doing more than one day, you are welcome to leave your items overnight. However, the Fingerlakes Mall is not responsible for any loss or damage to your property.
4. The vendor table must be manned by someone 18 years or older at all times. If you bring children with you, you are responsible for their safety and behavior. Please, keep them in your sight at all times. Children are not permitted to wander the mall without an adult, or to disrupt other vendors.
5. Your display table is to be kept neat at all times, and please clear your area of all debris when leaving. Vendors are responsible for damage to any mall property including rented tables and chairs.
6. Flyers/brochures are to be kept at your table only. Posting them throughout the mall, on tables or on vehicles in the parking lot is not allowed without prior permission from Fingerlakes Mall Management.
7. We will make every effort to accommodate location requests, but your location is ultimately decided at the discretion of Mall Management. Locations are assigned on a first come, first served basis. You will be notified of your location by email the week of the event.
8. Electricity will be provided on a first come, first served basis, and is not guaranteed. **You may need an extension cord to access it.** Please be sure that all cords are covered to avoid a tripping hazard.
9. Displays are limited to 6 feet in height unless previous arrangements are made with Mall Management. Your table/display should not block any doors, store fronts or walkways. If you are bringing anything other than a standard table, please note it on the first page of this application.
10. Photos may be taken for Fingerlakes Mall promotions unless otherwise requested.
11. Sound systems and/or music should not be played without prior permission from Mall Management.
12. **Refunds are not available.** However, if you cancel a minimum of 24 hours prior to the event, your payment can be used toward another date of your choice within 6 months of the original date.
13. Many variables contribute to your success including choice of product, pricing, foot traffic and more. Fingerlakes Mall makes no guarantee regarding a minimum of sales or foot traffic.
14. Vendor is responsible for following all local, state, CDC and Health Department regulations.

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

(updated January 2023)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



## **Fingerlakes Mall Code of Conduct**

**Fingerlakes Mall is committed to providing an enjoyable shopping experience for our customers. When visiting, please adhere to our Code of Conduct. Fingerlakes Mall is private property, and any violation can result in expulsion from the property and any other legal remedies that Mall Management deems necessary.**

### **Conduct**

- Any conduct or activity that is disorderly, disruptive, threatening or interferes with the safety and well-being of any of our businesses, guests or any well-being of the property is prohibited. These include, but are not limited to:
  - Running, horseplay, spitting, throwing objects or any other disorderly conduct
  - Using loud and/or offensive language, offensive gestures, or racial, religious, or anti-Semitic, gender, or ethnic slurs
  - Intimidating behavior by individuals or groups
  - Loitering, blocking storefronts or walkways
  - Picketing, protesting, petitioning or other activities that hinder shopping activity or disrupt businesses
- Bicycles, scooters, skateboards, hover boards, roller skates/blades, Heelys and other personal transportation devices are prohibited within the mall.
- Walking through planters, walking on brick borders surrounding planters or fountains, or reaching into fountains is prohibited.
- Violence, threats of violence, physical abuse or hostility of any kind is grounds for removal from the property and possible banishment from the mall for a period of time.
- Engagement in any sexual activity including, but not limited to, using sexually explicit language, engaging in sexual conduct, or engaging in excessive displays of affection are prohibited.
- Anyone found consuming alcohol or marijuana/cannabis, or found to be inebriated, or intoxicated or under the influence of any legal or illegal substance will be asked to leave the property immediately.
- Smoking of any kind including electronic and vapor smoking devices is prohibited within the building.

### **Solicitations**

- Any form of solicitation including, but not limited to distribution of any flyers, handbills, leaflets, or other marketing materials or commercial advertising requires prior consent of Mall Management. Any items found throughout the mall without this consent will be removed.
- All sales outside of tenant stores must be pre-approved and have paperwork on file with the Mall Management.

### **Violations of the Law**

- Violation of any local, state, or federal law is prohibited. This includes, but is not limited to:
  - Property damage, defacing or damaging of personal property, graffiti
  - Possession of any type of weapon except those carried by authorized law enforcement.

### **Photography**

- Prior permission must be given by Mall Management to take photos or videos of any mall property.

### **Clothing/Attire**

- All guests must wear appropriate attire including shirts and shoes.
- All local, state, CDC and Health Department regulations are to be followed while at the Fingerlakes Mall. Masks that cover the entire face, such as ski masks, are prohibited.

### **Minors**

- Children 12 years or younger must be accompanied by a responsible adult at all times.

### **Parking**

- The parking area is private property and is intended for the use of mall guests, tenants, and employees. Vehicles must park in designated spaces. Violators are subject to tickets and/or towing at the owner's expense. Overnight parking is not permitted without prior approval from Mall Management.

### **Dogs/Service Animals**

- Only Service Dogs, dogs of mall tenants, and those only going to and from a mall tenant are allowed.
- Dogs must be leashed (6ft maximum) or in a carrier, and under the owner's supervision at all times.
- Dogs must be in compliance with all laws including licensing and vaccinations.
- Dogs must be taken outside to urinate/defecate, and owners must clean up and properly dispose of defecation.
- Dogs must not cause disturbances such as loud barking, aggression, or being destructive.



**FINGERLAKES MALL HOLD HARMLESS AGREEMENT 2023**  
**(for vendors)**

I agree to defend, indemnify, and hold VACHI Fingerlakes, LLC and the Fingerlakes Mall, their officers, agents, employees, trustees, and directors, harmless from all injury or loss claims and/or damages to any person or property arising from, related to, or in any way connected with the use of Fingerlakes Mall property or any conduct undertaken. **Vendor Initials:** \_\_\_\_\_

I further waive the right to assert any claim for loss, costs, injury, or damages against Fingerlakes Mall, their officers, present or arising at any time in the future, arising from, related to, or in any way connected with the use of Fingerlakes Mall property or any conduct undertaken by me and all occupants of my vendor table during the period of \_\_\_\_/\_\_\_\_/\_\_\_\_ (Today's date) to **12/31/2023**. **Vendor Initials:** \_\_\_\_\_

**Name of Vendor:** \_\_\_\_\_

**Business/Organization Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Contact #:** \_\_\_\_\_

By signing below, I acknowledge that I have read and understand the Fingerlakes Mall Hold Harmless Agreement. I further acknowledge that I am at least 18 years old, and I am authorized to sign on behalf of all occupants of my vendor table. *(If you are not able to sign for all occupants, please have each individual complete a Hold Harmless Agreement.)*

**Signature of Vendor:** \_\_\_\_\_

**Date Signed:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Thank you from your friends at the Fingerlakes Mall.**  
**1579 Clark St. Rd. Auburn, NY 13022**

(updated October 2022)

## Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

|                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                           |
|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Print or type.<br>See Specific instructions on page 3. | <p><b>1 Name</b> (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <hr/> <p><b>2 Business name/disregarded entity name, if different from above</b></p> <hr/> <p><b>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</b></p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                 <input type="checkbox"/> C Corporation                 <input type="checkbox"/> S Corporation                 <input type="checkbox"/> Partnership                 <input type="checkbox"/> Trust/estate<br/> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____<br/> <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.<br/> <input type="checkbox"/> Other (see instructions) ▶ _____         </p> | <p><b>4 Exemptions</b> (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p> |
|                                                        | <p><b>5 Address</b> (number, street, and apt. or suite no.) See instructions.</p> <hr/> <p><b>6 City, state, and ZIP code</b></p> <hr/> <p><b>7 List account number(s) here</b> (optional)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <p>Requester's name and address (optional)</p> <hr/> <hr/>                                                                                                                                                                                                                                |

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

|                                                                                                                                                                                                                                                                                                                                                                                                                   |  |   |   |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---|---|--|--|
| <b>Social security number</b>                                                                                                                                                                                                                                                                                                                                                                                     |  |   |   |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                   |  | - |   |  |  |
| <b>OR</b>                                                                                                                                                                                                                                                                                                                                                                                                         |  |   |   |  |  |
| <b>Employer identification number</b>                                                                                                                                                                                                                                                                                                                                                                             |  |   |   |  |  |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> </tr> </table> |  |   | - |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |  | - |   |  |  |

### Part II Certification

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.

**Certification instructions.** 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 for Part II, later.

|                  |                            |        |
|------------------|----------------------------|--------|
| <b>Sign Here</b> | Signature of U.S. person ▶ | Date ▶ |
|------------------|----------------------------|--------|

### General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

#### Please Note The Following:

- This form only needs to be filled out once and is kept on file in the Fingerlakes Mall Management Office. It is only provided to the IRD upon request.
- If you do not have an Employer Identification Number, please fill in your Social Security Number