



APPLICATION FOR HARVEST KITCHEN

Thank you for your interest in renting the Harvest Kitchen at the Extension Learning Farm. If you would like assistance with any part of the application, licensing process or food business incubator services, contact Maria ‘Flip’ Filippi, Kitchen Manager and Local Foods Program Leader at harvestkitchen@cornell.edu or (315) 379-9192, ext. 229. See chart below for elements required for a complete application.

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PRE-RENTAL CHECKLIST
for vendor reference

DATE COMPLETED
for office use

Schedule a consultation with the Kitchen Manager and tour the facility.

- Submit completed Harvest Kitchen Application
- \$200 deposit
- Certificate of Insurance for General Liability, with CCE listed as additionally insured
- Certificate of Insurance for Auto Liability

Depending on the use of facility, some renters will also need to submit:

- NYS Department of Health Permit OR
NYS Dept of Agriculture & Markets Food Processing License (20C)

Attend Orientation –varies with intended equipment use, 1 to 2 hours total

Arrange for key pickup

Cornell Cooperative Extension | St. Lawrence County

GENERAL INFORMATION

This License to use the **Harvest Kitchen** is entered into between Cornell Cooperative Extension of St. Lawrence County, 2043B State Highway 68, Canton, NY 13617 and the following named Licensee:

Name of Organization/Group: _____ Date: _____

Contact Person (Licensee)*: _____ Primary Phone: _____

Email: _____ Secondary Phone: _____

Mailing Address: _____

Primary Use of Kitchen (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Business Start-up | <input type="checkbox"/> Increase Current Production Capacity |
| <input type="checkbox"/> Catering Business | <input type="checkbox"/> Commissary for Food Truck |
| <input type="checkbox"/> For Class or Demonstration | <input type="checkbox"/> Other: _____ |

Do you have a new or existing business? New Existing N/A

If existing, how long have you been in business? _____

Do you have the necessary licenses or certifications?

If food will be served (on or off-site), do you have a NYS Health Department Permit?

- Yes Not yet N/A

If food product is being prepared for market, do you have a Food Processing License from NYS Ag & Markets?

- Yes Not yet N/A

Would you like technical assistance in developing your business? Yes No N/A

If yes, in what area (s)? License/permits Brand development Finding markets

Recordkeeping Food safety Product development Other: _____

How are you planning to use the Harvest Kitchen? _____

Intended Frequency of Kitchen Rental:

- Single Use Daily Weekly Monthly Other: _____

Is the date/time for use of the kitchen flexible? Yes No

Approximate rental time including prep set-up and cleanup: _____

Anticipated number of people using the kitchen (including yourself): _____

***Contact Person/Licensee must complete kitchen orientation prior to use, be present throughout use and will be responsible for compliance with use and sanitary procedures listed on page 4.**

RENTAL TERMS & RATES

Rental Terms

KITCHEN AVAILABILITY: Reservations are first-come, first-served. Contact Kitchen Manager for availability.

RENTAL INCLUDES: When renting the kitchen vendors have access to all appliances, smallwares and tools owned by the Harvest Kitchen. In addition, rental costs includes access to janitorial supplies and waste disposal.

CLEANING: Renters of the Harvest Kitchen are responsible for cleaning and sanitizing the Kitchen after each use. Vendors will be billed for full time in Kitchen from arrival to close of shift after full cleaning.

BILLING SCHEDULE: Billing occurs on a monthly basis, unless alternate arrangement is approved in advance of use.

SIGN-IN & SIGN-OUT: Vendors are required to enter exact time that each shift begins and ends on form in Kitchen.

CANCELLATIONS: If vendors cannot make their reserved kitchen rental, they must contact the kitchen manager at least 12 hours in advance of rental time to re-schedule. In cases of a no-show, the vendor will be charged for the rental slot.

RATE ADJUSTMENT: Rates are subject to change upon annual review.

Rental Rates

STANDARD RATES: \$27 per hour. Rates for vendors after 12 months from their first rental of the Harvest Kitchen.

FOOD START-UP: \$23 per hour. These rates apply to vendors in their first year as renters in the Harvest Kitchen. After 12 month from first rental, fees will increase to standard rate.

SINGLE USE: \$40 per hour. These rates apply when a business, non-profit or organization reserves the Harvest Kitchen for a one-time event, such as preparing food for an onsite or offsite fundraiser. The rates are higher than on-going renters such as standard and food start-ups to cover the costs of orientation and proper facility use.

DISTRIBUTION ONLY: \$50 per hour. These rates apply when an organization utilizes the storage capabilities of the Harvest Kitchen and will not be processing food, as in a one-time distribution of goods from the walk-in cooler. The rates are higher than those for ongoing renters to cover the costs of orientation and proper facility use.

EXTERIOR POTABLE WATER ACCESS: \$100 per year. For mobile units.

DEPOSIT: A \$200 deposit is required from all tenants before rental. This deposit covers expenses such as lost key replacement, damages, loss of equipment, cleaning violations. The deposit will be cashed at the time of submission and returned at the end of the contract period if all conditions of this agreement are met and the Kitchen is left clean and in good repair. Damages and repairs exceeding the deposit amount will be invoiced.

STORAGE: Per 6 square feet per month of ongoing storage. Dry goods: \$10. Walk-in Fridge: \$20. Freezer: \$30. Additional space will be charged accordingly. Vendor must discuss storage needs with Kitchen Manager.

SPECIALTY EQUIPMENT: The blast chiller and dehydrator have additional fees per hour of use due to energy needs.

ADJACENT CLASSROOM: \$10 per hour. Check for availability.

I have read the rental rates and understand the terms of its contents, indicated by my signature below. I further understand that failure to comply with the terms of this agreement by not completing the mandatory steps and/or non-payment for two consecutive sessions will be cause for termination of this contract.

Signature: _____

Date: _____

USE OF FACILITIES AGREEMENT

Cornell Cooperative Extension of St. Lawrence County (CCESLC) is proud to provide the Harvest Kitchen at the Extension Learning Farm as a venue for value added processing, catering, workshops and other public events. We expect that individuals and groups using the kitchen will have basic consideration for others in assuring that the shared kitchen space is left clean and in good order. The Kitchen Manager is responsible for ensuring that the kitchen space, equipment and supplies are in good condition after use by other individuals and groups, and that procedures have been properly followed. Please adhere to the general procedures for use listed below:

General Requirements

- Complete registration and scheduling procedures with Harvest Kitchen Manager.
- Complete an orientation with Kitchen Manager prior the scheduled use, including training of needed specialized equipment.
- Meet NYS Ag & Markets permit requirements for any product intended for sale.
- Meet NYS Department of Health permit requirements for any product consumed by public.
- No persons under the age of 18 permitted in the kitchen when being rented by a Tenant. Violators of this provision will result in immediate revocation of this License.

Day of Usage Requirements

- All food items stored in kitchen or dry goods area to be labeled with business name, food name and date.
- Use cutting boards for food preparation; do not cut directly on countertops.
- Protect countertops from hot pots, pans or dishes using oven mitts or pads.
- The kitchen is not to be left unattended while stoves/ovens are in use. Hood vent **must** be on whenever the stoves or ovens are in use.
- Clean and leave the kitchen in the same condition at the end of your use as it was at the beginning of your use. This includes dishes, pans, utensils, countertops, stoves and ovens, sinks, floors and equipment.
- Kitchen floors must be swept and mopped prior to leaving.
- Vendors are responsible for removing their own waste. Bag up garbage/recycling and place it in the dumpsters located in the back parking lot. Food waste bin should be rolled into breezeway and replaced with an empty bin. Food waste bucket is for plant material – no meat, eggs or garbage.
- Ensure that stoves, ovens, dishwasher, faucets and fans are turned off at the end of use.
- Complete the Kitchen Clean-up checklist after every use.
- Report any missing/broken equipment to the Kitchen Manager.
- Shut off all lights and lock both kitchen doors after use.
- Place the key in the drop-box located in the breezeway (exception is recurring vendors with a key issued to them).

In Case of Emergency

- Note the location of first aid kits and fire extinguishers in the kitchen.
- In case of an emergency, in addition to contacting 911 as appropriate, please contact Flip Filippi 315-854-5399 or Patrick Ames at 315-854-5052. The following are examples of emergencies: personal injury requiring emergency treatment, extensive property damage, accidental lock out, inability to lock up at end of session (including lost keys), issues involving fire, gas and water leaks. Do not independently call in any of the following: plumber, locksmith, electrician, etc. for repairs.
- An **accident/incident report** must be completed whenever there is an accident or incident involving employees, volunteers, participants, tenants, the general public, property or vehicles. Complete this report within 12 hours of the incident and notify emergency contact about as soon as possible. Blank forms can be found in the document holder inside the kitchen.

We look forward to a continued successful working relationship. Contact Kitchen Manager directly with questions.

I have read the Use of Facilities Agreement and understand the terms of its contents, indicated by my signature below.

Signature: _____

Date: _____

TERMS OF USE & LICENSE AGREEMENT

This LICENSE is between Cornell Cooperative Extension of St. Lawrence County (EXTENSION) and

_____ (LICENSEE) who is granted this license to use the kitchen facilities indicated above subject to the all of the terms, conditions and procedures herein.

1. LICENSEE shall indemnify and hold harmless EXTENSION, their employees, volunteers, agents, Directors and officers and Cornell University from and against any and all actual or alleged claims, suits or demands of any kind and nature whatsoever that result from injury or illness to any person or persons, including death, or damage to property arising out of any act or omission of the LICENSEE, its employees, volunteers, participants or agents and arising out of its use and occupancy of the premises indicated above. LICENSEE is solely responsible for examining the facilities for suitability for all activities contemplated herein and accepts the facilities "as is".

2. **The LICENSEE shall provide Certificates of Insurance to EXTENSION** at least ten (10) business days prior to the first date of facility usage or event, showing evidence of the following minimum limits of insurance or as required by law, whichever is greater. Said certificate shall name Cornell Cooperative Extension of St. Lawrence County as **additional insured** with not less than 10 days notice of cancellation. P. W. Wood & Son, Inc. will review the certificate for approval. All insurance must be written in a New York State licensed insurance company with a Best's rating of A- or better. Certificate must be signed by an authorized representative of the insurance company and indicate the event/reason for facilities usage on the Certificate. Insurance required of the LICENSEE shall be primary and non-contributory in all respects to any insurance carried by EXTENSION and shall not look to EXTENSION insurance for any contribution toward claims arising out of the use of the Facilities by the LICENSEE.

a. Comprehensive General Liability including Contractual and Products/Completed Operations, with a minimum **combined single limit per occurrence of \$1,000,000.**

b. Worker's Compensation, if required by law. If not required, initial here _____

c. **Auto Liability—minimum \$300,000.**

d. If any other Outside Vendor is being used at the kitchen, or event, they must also provide certificates to EXTENSION evidencing the same coverages as listed above. They must also sign this form acknowledging the terms and conditions.

e. If alcoholic beverages are being served or distributed during the use, a Certificate of Insurance showing proof of Liquor Legal Liability of not less than \$1,000,000.

Groups NOT affiliated with EXTENSION systems or programs of EXTENSION must make it clear in advertising that EXTENSION is NOT a sponsor/co-sponsor or co-host of the meeting or activity of LICENSEE's group. EXTENSION is not responsible for handling calls about events being held by groups not affiliated with EXTENSION. Do not list EXTENSION phone number in event publicity.

Required Language for Publicity. "XXX meeting is being held at the Cooperative Extension building located at 2043B State Hwy 68, Canton, NY, 13617. This is not a program of Cornell Cooperative Extension of St. Lawrence County and the use of CCESLC meeting rooms does not imply endorsement of this program or activity by CCESLC"

3. Parking is permitted in the designated areas only.

4. No use of the Facilities by the LICENSEE until all terms and conditions are met including insurance and authorized signature of CCE representative.

I/we (LICENSEE) consent to the terms and conditions of Terms of Use & License Agreement as set forth by Cornell Cooperative Extension of St. Lawrence County. Failure to adhere to said terms and conditions as outlined in this Agreement, and/or any other correspondence/forms relating to said usage, will result in loss of facilities use privileges without regard to compensation.

_____	_____
Authorized Signature	Title
_____	_____
Print Name	Phone Number
_____	_____
LICENSEE exact business name	Date
_____	_____
Outside Vendor Authorized Signature	Date

Print Name	

Return this form with your original signature to:
Cornell Cooperative Extension of St. Lawrence County
Kitchen Manager
2043B State Highway 68
Canton, NY 13617
harvestkitchen@cornell.edu

OFFICE USE ONLY

Received by Cornell Cooperative Extension of St. Lawrence County:

_____	_____
Received By	Date
_____	_____
Rental Approval-Authorized CCE Signature	Date

Key Issued: _____ First use: _____