

INFORMATION – RETAIL BOOTH
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Location of Event: Golden Valley High School  
2121 E Childs Ave  
Merced, California 95341

1. Approval of your booth request is subject to a first-come, first-serve basis. Items intended for sale **MUST** be listed on reverse side of application.
2. You **MUST** have and be in possession of a current Seller License (Resale Certificate). Copy of this California State Board of Equalization document must be enclosed with this application. Failure to enclose a copy of your current Sellers License issued by the Board of Equalization for the State of California will result in delaying your application and could lead to you not procuring a booth. A temporary license may be obtained at your local California State Board of Equalization office.
3. All booths are responsible for their own maintenance and clean-up. There is a one hundred-dollar (\$100.00) deposit to be paid by separate check and mailed with this application and booth fee. Check will be deposited and a check will be issued after clean-up and/or inspection has been performed as well as verified and the kitchen inventory is complete for food booths utilizing kitchen.
4. A map of your location will be displayed from Friday, March 21<sup>st</sup> from 4:00pm.
5. Booths should be set and open on Friday from 5pm -9pm. Doors for the public will be open at 5pm. Booth operation hours for Saturday and Sunday are 9am - 9pm daily.
6. Application, booth fee, deposit check and copy of Sellers License must be postmarked by March 01, 2025.
7. Kiki Raina or its agents will not be held responsible for theft or accidental injury incurred at this event or assigned booth due to normal operations.

NON-PROFIT #:(If applicable) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

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[illegible]

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Kiki Raina Tahiti Fete 2025

APPLICATION – RETAIL BOOTH

OPTIONS	FRIDAY	SATURDAY	SUNDAY	3-DAYS
(A) Approximately 8'x11' Space 1 Table & 2 Event Entry Tickets	\$80 ____	\$130 ____	\$130 ____	\$340 ____
(B) Approximately 16'x11' Space 2 Tables & 3 Event Entry Tickets	\$100 ____	\$150 ____	\$150 ____	\$400 ____
(C) Approximately 24'x11' Space 3 Tables & 4 Event Entry Tickets	\$120 ____	\$170 ____	\$170 ____	\$460 ____

\*\*Check all that apply

Add 3% for credit card or via  
PayPal

Amount Enclosed \_\_\_\_\_  
Booth Deposit Check (Separate) \$100 per Booth \_\_\_\_\_

**Total Amount Enclosed** \_\_\_\_\_

Personal checks accepted until Feb 15<sup>th</sup> only.

Cashier's check and money orders accepted through Mar 1<sup>st</sup>

To:  
SPDC  
c/o KIKI RAINA  
453 N. Gurr Road  
Merced, CA 95341

Tel. (209) 383-1435

Postmark by February 15, 2025

For Office use only:

Amount Received: \_\_\_\_\_

Form of payment: \_\_\_\_\_

Date Received: \_\_\_\_\_



## CITY OF MERCED

Finance Department – Business License Application – **Special Events**  
678 West 18<sup>th</sup> Street  
Merced, CA 95340  
(209) 385-6843

Business Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Type of Business (Give Full Description) \_\_\_\_\_

Type of Organization: ☐ Corporation ☐ Partnership ☐ Sole Owner ☐ Other \_\_\_\_\_

Federal Tax ID# \_\_\_\_\_ State Tax ID# \_\_\_\_\_ State Sales Tax # (Required) \_\_\_\_\_

Name of Owner \_\_\_\_\_ Home Phone ( \_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_ Social Security # \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of Owner \_\_\_\_\_ Home Phone ( \_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_ Social Security # \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of Owner \_\_\_\_\_ Home Phone ( \_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_ Social Security # \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Date of Birth \_\_\_\_\_

Emergency Contact (Primary) \_\_\_\_\_ Phone # \_\_\_\_\_

Emergency Contact (Secondary) \_\_\_\_\_ Phone # \_\_\_\_\_

☐ Name of Event \_\_\_\_\_

☐ Event Date(s) \_\_\_\_\_

**NOTE: If you are a food vendor, a copy of your health certificate is required.**

The undersigned applicant does hereby agree to indemnify and hold harmless the City of Merced, its officers, agents, and employees from any and all liability, costs, damages, or injuries to persons and damage to property which may arise out of or in any way be connected with the business.

Signature \_\_\_\_\_ Total Due \$ \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_ License # Issued \_\_\_\_\_

### (FOR FINANCE USE ONLY)

Date Billed \_\_\_\_\_ Classification \_\_\_\_\_

Total Due \$ \_\_\_\_\_ Account # \_\_\_\_\_

Verified By \_\_\_\_\_

\*Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies: The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx); The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov); The California Commission of Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).