



# Event Vendor Application

**PLEASE RETURN TO:**

**THIS SECTION TO BE COMPLETED BY ALL EVENT SPONSOR:**

Community

Civic

City Program

EVENT SPONSOR \_\_\_\_\_

EVENT CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

EVENT NAME \_\_\_\_\_

EVENT DATE : \_\_\_\_\_ TO \_\_\_\_\_ EVENT TIME: \_\_\_\_\_ TO \_\_\_\_\_

**Effective December 1, 2017 every vendor selling items at retail is required to apply for and pay \$2 for a City transaction privilege tax license and \$12.00 for a State transaction privilege tax license with the Arizona Dept of Revenue [www.aztaxes.gov](http://www.aztaxes.gov). if not already licensed. You will be required to confirm your transaction privilege tax license before attending. There could be other fees associated with a vendor application dependent on event and vendor status. Check with your event sponsor for specific details on fees. Mobile food vendors will also need to complete the mobile food vendor permit at the City Clerk's Office. City hours Monday—Thursday 7:00am –6:00pm.**

BUSINESS NAME \_\_\_\_\_

OWNER NAME \_\_\_\_\_ PHONE \_\_\_\_\_

STATE ISSUED TRANSACTION PRIVILEGE TAX # \_\_\_\_\_

CITY OF APACHE JUNCTION VALID BUSINESS/NON-PROFIT LICENSE# \_\_\_\_\_

*(If you don't have one, please leave blank)*

**MUST ATTACH A COPY OF YOUR TAX LICENSE**

ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**CHECK ONE:**

TYPE OF OWNERSHIP: CORP \_\_\_ LLC \_\_\_ INDIVIDUAL \_\_\_ OTHER \_\_\_

NON PROFIT 501(C) \_\_\_ **(MUST PROVIDE COPY OF 501(C) IF NOT ON FILE WITH THE CITY)**

BUSINESS DESCRIPTION \_\_\_\_\_

Will you making any sales? \_\_\_\_\_

I CERTIFY THAT THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THE GRANTING OF THIS APPLICATION DOES NOT RELIEVE ME FROM COMPLYING WITH THE PROVISIONS OF ANY APPLICABLE CITY CODE. VENDOR APPLICATION FEES ARE NON-REFUNDABLE NOR TRANSFERABLE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_