



## **NOTICE TO SPECIAL EVENT APPLICANT/SHOW PROMOTER**

Thank you for doing business in our Town we are glad you are here. There are a few things that we would like you to do to participate in the special events per our Town Code.

### **Required attachments to the application:**

- Copy of State Transaction Privilege Tax License (If Applicable)
- Copy of applicants driver's license. (in accordance with A.R.S.§ 41-1080)
- Site Plan on **11X17 paper**
- Certificate of Insurance, specifically stating the dates of the special event, for Commercial General Liability naming the Town of Pinetop-Lakeside as an additional insured. The minimum limits are \$1,000,000 per occurrence and \$2,000,000 aggregate.

### **Other requirements:**

- We must receive all Promoter applications a minimum of **30 days prior** to the start of the event and all vendor applications a minimum of **10 days prior** to the start of the event.
- We asked that you work with your vendors to get complete applications. We will not contact the vendors if their application is incomplete, and all incomplete application may be denied.
- If you have vendors show up for an event and they have not been issued a permit they will be asked to leave. We will not issue permits the day of the event.
- All State Transaction Privilege Tax License numbers will be verified with the state and if invalid the permits may be denied. **A copy of all TPT Licenses must be displayed at the event.**
- We ask that you encourage your vendors to collect and pay their taxes. Each vendor is to collect a 8.6% tax on all items sold (food for immediate consumption on grounds is 10.6%) and pay the taxes to the State and indicate that the sales were made within the Town of Pinetop-Lakeside. Taxes paid to the state will be verified by the Town.
- Any vendor that does not pay taxes may be denied in the future.

If you have any questions please call Cody Blake at (928)368-8883 x 231

Thank you,

Cody Blake



<b>FOR OFFICIAL USE ONLY</b>	
PERMIT #:	_____
PERMIT FEE PAID: \$	_____
DATE:	_____
ISSUED BY:	_____

**TOWN OF PINETOP-LAKESIDE  
SPECIAL EVENT PERMIT APPLICATION**

**All applications must be submitted a minimum of 30 business days prior to the start of the event.**

APPLICANT NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

SPECIAL EVENT ADDRESS: \_\_\_\_\_

DATE(S) OF SPECIAL EVENT: \_\_\_\_\_ (Permit good only on date(s) indicated)

APPLICANT'S PHYSICAL ADDRESS: \_\_\_\_\_

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

APPLICANT'S MAILING ADDRESS: \_\_\_\_\_

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

E-MAIL ADDRESS: \_\_\_\_\_

**NATURE & TYPE OF BUSINESS:**

- |   |  |
|---|--|
| <input type="checkbox"/> Retail Sales         | <input type="checkbox"/> Other Sales                 |
| <input type="checkbox"/> Real Estate Services | <input type="checkbox"/> Other Professional Services |
| <input type="checkbox"/> Auto Sales, New/Used | <input type="checkbox"/> Other: _____                |

Brief Description: \_\_\_\_\_

Please describe any chemicals or hazardous materials/wastes to be used or stored by the business: \_\_\_\_\_

**TYPE OF BUSINESS ENTITY:**

- |   |  |
|---|--|
| <input type="checkbox"/> Corporation            | <input type="checkbox"/> Sole Proprietorship |
| <input type="checkbox"/> Non-Profit Corporation | <input type="checkbox"/> L.L.C.              |

**State Transaction Privilege Tax License #:** \_\_\_\_\_

**(Copy of State License MUST be attached to THIS application)**

If a Corporation or L.L.C., state where formed: \_\_\_\_\_

Name and Address of Statutory Agent: \_\_\_\_\_

Federal I.D. #: \_\_\_\_\_

If applicable: (Please attach a copy of the Permit)

Navajo County Health Department Certificate/Permit: \_\_\_\_\_

Federal Licenses/Registrations/Permits: \_\_\_\_\_

**OWNER/OFFICER(S) OF BUSINESS:**

NAME

ADDRESS

\_\_\_\_\_

\_\_\_\_\_

**PLOT PLAN REQUIREMENTS:**

Applicants for a special Event Permit may be required by the Administrator to submit three (3) copies of a Plot Plan on **11X17 paper**, indicating the following:

- A. Exact site location and layout of the event.
- B. Location and number of booth spaces, stalls or vending areas.
- C. Location of temporary structures and temporary utilities necessary for operation.
- D. Location and provision of toilets and other sanitary services.
- E. Ingress and egress.
- F. Fire and emergency vehicle access.
- G. Parking areas.
- H. Signage.
- I. Lighting.

NAME & PHONE NUMBER OF PERSON TO BE CONTACTED IN THE EVENT OF ANY EMERGENCY:

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SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

DATED: \_\_\_\_\_

**APPLICATION FEE: \$100.00**