



CITY OF RIALTO
 150 South Palm Avenue • Rialto, CA 92376
 •(909) 820-2302•

SPECIAL EVENTS VENDOR APPLICATION

Payment Due: _____
 Expiration Date: _____

Your Business Tax is now due and payable. To avoid penalty fees, submit payment before expiration date. ●OFFICIAL USE ONLY●

Business Name _____	BUSINESS LICENSE NO _____
Business Location _____ City _____ State _____ Zip _____	LICENSE FEE \$ _____
Mailing Address _____ City _____ State _____ Zip _____	TOTAL AMT PAID \$ _____
Bus Phone () _____ Bus Fax () _____	DATE PAID _____
E-Mail Address _____	CASH/ CHECK/ MONEY ORDER
	RECEIPT NO _____
	CODE _____

Start Date _____	Description of Business _____
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Ownership: Corporation Ltd Liab Corp Partnership Sole Proprietor Trust
 State Lic. No. _____ Lic. Type _____ Expiration Date _____
 Resale No. _____ Federal I.D. No. _____ State I.D. No. _____

This section must be completed for each owner, partner, corporation officer and local manager.

Owner Name _____ Title _____ Phone () _____
 Home Address _____ Cell Phone() _____
 City _____ State _____ Zip _____
 Social Security No. _____ Drivers License No. _____

Owner Name _____ Title _____ Phone () _____
 Home Address _____ Cell Phone() _____
 City _____ State _____ Zip _____
 Social Security No. _____ Drivers License No. _____

In Case of Emergency Please Contact:
 Name _____ Title _____ Phone () _____
 Address _____ Cell Phone () _____

This Permit is for Special Events ONLY. It does not sanction any act not otherwise permitted. In addition to this permit, Vendors must obtain authorization from the Sponsoring Agency. Applicant is responsible for obtaining State of California Sales Tax Number, if necessary, and to provide such number to the City of Rialto.

Location of Event: _____

If you closed your business prior to the expiration date, please enter closing date and sign: Date: _____ Signature: _____

PLEASE CALCULATE AMOUNT DUE BY ENTERING INFORMATION IN BOXES BELOW AND SIGN

Weekly Rate: \$5.00
 Annual Rate: \$79.00

Amount of License Tax _____
 TOTAL AMOUNT DUE **\$5**

*Thank you for doing business
 In the City of Rialto!*

I declare under penalty of perjury that the statements made herein are true and correct to the best of my knowledge and belief and that I have read this notice at Rialto, California.

Date: _____ Signature of Owner or Representative: _____