

SPECIAL EVENTS

Privilege (Sales) and Use Tax Application



City of Tempe, Tax and License
 660 S. Mill Ste. 105, PO Box 5002
 Tempe, AZ 85280-5002
 (480) 350-2955

THIS APPLICATION IS TO BE USED FOR SPECIAL EVENTS ONLY

Have you previously performed retail sales, food sales, or other activities for a fee at a Tempe Special Event? Yes <input type="checkbox"/> No <input type="checkbox"/>		Current Privilege (Sales) Tax License #	Previous Privilege (Sales) Tax License #	License #
If so, when				Annual Fee \$30.00 NON-REFUNDABLE See Back For Fee Information
SECTION I. BUSINESS INFORMATION				
Business Name (Individual, Company or "DBA", first name first)				
Street No. (N,E,S,W)	Street Name		Type	Ste/Apt #
City	State	ZIP Code	Area Code	Business Telephone #
Start Date	E-mail address	State License #	Federal ID #	For Office Use Only
SECTION II. MAILING ADDRESS & PHONE NUMBER				
Enter Name if Different from Section I (above) or Enter 'In-Care-Of' Name				Telephone #
Street No. (N,E,S,W)	Street Name		Type	Ste/Apt #
City	State	ZIP Code + 4	Fax #	
SECTION III. BUSINESS OWNERSHIP & RECORD LOCATION				
<input type="checkbox"/> Individual <input type="checkbox"/> LLC <input type="checkbox"/> Corp. - State Inc. <input type="checkbox"/> Gen. Partnership <input type="checkbox"/> Ltd. Partnership <input type="checkbox"/> Other _____				
Owners, Partners, LLC Members, or Officers (For Additional Names, Please Attach List)	1) Name			Social Security #
	Home Address			Title
	City	State	ZIP Code	Phone No. ()
	2) Name			Social Security #
	Home Address			Title
	City	State	ZIP Code	Phone No. ()
Corporate or LLC Statutory Agent	Name			Phone No. ()
Location Where Business Records Are Kept	Name			Phone No. ()
	Address		City	State ZIP Code
SECTION IV. BUSINESS TYPE				
<input type="checkbox"/> Retail Sales <input type="checkbox"/> Amusement <input type="checkbox"/> Food Sales <input type="checkbox"/> Other _____				
Special Event Name & Dates & Location				

I certify that the statements made in this application are true and complete to the best of my knowledge. I accept the license authorized and issued in response to this application with the condition that I report timely and pay any and all taxes due by me to the city. Incomplete forms may not be processed.

IF APPLICABLE, BE SURE ALL SALES TAX HAS BEEN PAID BY FORMER OWNER. BY LAW YOU MAY BE LIABLE FOR ANY UNPAID TAX.

Print Name	Signature	Title	Date
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Please read all instructions. Incomplete applications cannot be processed.



MAILING ADDRESS City of Tempe
Tax and License Division
PO Box 5002
Tempe AZ 85280

PHONE: (480) 350-2955

WEB SITE: www.tempe.gov/salestax

SITE ADDRESS Tax and License Division
660 S. Mill Ave. Suite 105
(Centerpoint Plaza)
Tempe, AZ

FAX: (480) 350-8659

EMAIL: salestax@tempe.gov

INSTRUCTIONS FOR COMPLETING THE APPLICATION

THIS APPLICATION IS FOR SPECIAL EVENT VENDING ONLY

Fees – Application & License

Temporary or Special event licenses may be issued to an individual or business that will be operating a taxable business within the city for 30 days or less. The cost for this license is \$10 plus the \$20 application fee.

Note: All Fees are nonrefundable.

General Information

If you are a new owner of an existing business, the name and Tempe license number of the previous owner must be provided. **Note: Under the Tempe Tax Code you are liable for any unpaid tax liability of the previous owner.**

A new license is required for each individual special event.

Section I: Business Information

This section is to be completed with the name, address, phone number and other information of the business operating within the City of Tempe.

Business Name

List the business or company name and the "DBA" if it is applicable for your Tempe business operation. If you do not have a separate business name, list the owner of the business.

Address

Enter your Tempe business location address, including the suite, unit, or apartment numbers. If you do not have a Tempe business location, list your business operation location.

Business Phone

The phone number listed in this section needs to correspond with the Tempe business location.

Start Date

Provide the date (month/day/year) of the first taxable business activity in Tempe. If you are applying for a license due to an ownership change or change of location, the start date (month/day/year) is the date of the change.

E-mail address

Provide the E-mail address for the person who should receive general Tempe Privilege and Use Tax information updates.

Arizona Tax License # & Federal ID#

Provide your Arizona State privilege tax and Federal Tax Identification numbers.

Section II: Mailing Address, Phone & Fax Numbers

This section is used for the name, address, phone and fax numbers of the person or business that will be responsible for receiving and preparing the Tempe tax reports. Note: As the business license and tax return mail will be sent to this address, be sure to include suite, unit, or apartment numbers.

Section III: Business Ownership and Record Location

This section is used for the type of ownership of a business and to list the owners, partners, or another office of the business.

Ownership

Indicate the ownership type. Corporations need to indicate the state in which they were incorporated.

Owners/Partners/LLP/LLC Members or Officers

All corporations must provide a list of officers as well as statutory agent information. LLCs must provide a list of members. General partnerships and LLPs must provide a list of all partners. For each person, their social security number, business title, home address and home phone number are required (not the business address and phone). Indicate if phone numbers provided are unpublished. P.O. Box numbers are not acceptable for home addresses.

Statutory Agent

The name, address, and phone number of your Statutory Agent is required. If you have nexus in Arizona, an Arizona agent must be listed.

Records Location

Complete this section if the business records are not kept at the location listed in Section II.

Section IV: Business Type

Check all types of business activity that you will be conducting in Tempe. If "Other," describe.

Provide a detailed description of the special event, including event name and date(s) of the event.

Sign and mail the application along with your application fee and annual license fee.