

Zone Color _____ Booth# _____

Date Received ___/___/___

Paid: \$ _____

Check # _____/Cash

2019 Old Fashion Day

Vendor Application

September 7, 2019

Complete this application in full.

Business/Organization Name: _____

Contact Person: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Booth spaces will be assigned according to Vendor type and will not be held until form and payment is received. If you are a food vendor you must provide the City of Walton your liability insurance and fill out a temporary food permit and submit to Northern Kentucky Health Department 3 days prior to our event.

Type of booth (Please circle one): Arts & Crafts / Information / Food / Game / Politician

What will you be selling/promoting?

FEES:

\$50 Per booth space without electric

\$100 Per booth space with electric **LIMITED SPOTS**

No. OF 10 X 10 SPACES _____ TOTAL ENCLOSED \$ _____

Application Due Date: No Applications will be accepted after Wednesday August 28, 2019.

Make check or money order payable to: City of Walton (Please write in memo: OFD)

Mail application and payment to: City of Walton, P.O. Box 95, Walton, KY 41094

Booths must be set up by 11:00AM and your vehicle off the street. NO parking on the sidewalks. For the protection of our guests, no vehicles shall be on the street prior to the close of Old Fashion Day at 10:00 p.m. STREETS MUST BE CLEARED BY 11:00 P.M.

No sales permitted of aerosol spray cans, fireworks, or projectiles of any kind.

THERE WILL BE NO RAIN DATE AND NO REFUNDS.

Applicant's Signature

Date



MATTHEW G. BEVIN
GOVERNOR

Department of Revenue
Finance & Administration Cabinet
Northern KY. Taxpayer Service Center
Turfway Ridge Office Park
7310 Turfway Rd, Ste 190
Florence, KY 41042-4871

WILLIAM M. LANDRUM III
SECRETARY

DANIEL P. BORK
COMMISSIONER

BRENT KING
EXECUTIVE DIRECTOR

ALL VENDORS - - THIS LETTER MUST BE RETURNED

Kentucky Department of Revenue records indicate that you will be a vendor at WALTON OLD FASHION DAY in WALTON, Kentucky held SEPTEMBER 7, 2019. As a vendor, KRS 139.200 imposes a 6% sales tax upon all retail sales made within the Commonwealth.

If you currently hold a Kentucky Sales and Use Tax Permit, you are to report the activities of this event on that number. Please provide the name as shown on the permit and the Kentucky sales tax permit number in the area designated below. Do not send the payment of the tax due from this event with this letter.

Name as it appears on permit _____ (SER)
Kentucky Sales and Use Tax Permit Number

If you are not registered for a Kentucky sales and use tax permit number, you must complete the bottom portion of this letter and return it with payment of the tax due to the address shown on this letter. Make checks or money orders payable to: **Kentucky State Treasurer.**

Failure to comply with this request by **OCTOBER 20, 2019** will result in the issuance of a jeopardy assessment pursuant to KRS 131.150. Such assessment will include all applicable penalties and interest.

If you have any questions, contact the **Northern Kentucky Taxpayer Service Center** at (859)371-9049. The office hours are Monday through Friday, 8:00 A.M. to 5:00 P.M.

30A006-NKY (12/15) Temporary Vendor Sales and Use Tax Return/Processing Document

010
***Social Security Number / FEIN Tax Type Business Name

Last Name First Name Middle Name

Street Address City State Zip Code

09 2019 WALTON 006
Month (01-12) Year County Type Return **Note: If you attend multiple events, use a separate form and check for each event.**

Total Sales X .06 = _____
Total Tax Paid

Date Taxpayer Signature Phone Number

****Required. If not provided, an additional fee may be charged for acquiring this information and a Department of Revenue inquiry may be posted to your credit report.

Event Name: **WALTON OLD FASHION DAY** Field Officer Initials: SER

