



**TOWN OF BRECKENRIDGE  
APPLICATION FOR SPECIAL EVENT BUSINESS LICENSE**

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

NAME OF ORGANIZER \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

CO SALES TAX # \_\_\_\_\_ CO SPECIAL EVENT NAME \_\_\_\_\_

LOCATION OF SPECIAL EVENT \_\_\_\_\_

DATE (S) OF SPECIAL EVENT \_\_\_\_\_

EVENT DESCRIPTION / TYPES OF GOODS TO BE SOLD / ENTERTAINMENT/ACTIVITIES \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE CHECK ONE:**

\_\_\_\_\_ Each vendor will remit sales tax INDIVIDUALLY

\_\_\_\_\_ EVENT ORGANIZER will remit sales tax for all vendors

A list of all vendors MUST BE attached. Vendor list includes all businesses such as recycling, security, food vendors, retail vendors, and sponsors with employees present.

**A SPECIAL EVENT PERMIT APPLICATION MUST BE SUBMITTED AND APPROVED.**

I declare under penalty of perjury in the second degree that the statements made in this application are true and complete to the best of my knowledge.

\_\_\_\_\_

Signature

Date

FOR OFFICIAL USE ONLY PLEASE DO NOT WRITE BELOW THIS LINE

Date application received \_\_\_\_\_

Date \$250.00 License Fee Paid \_\_\_\_\_ Receipt# \_\_\_\_\_

Vendor List Submitted: yes no

Comments: \_\_\_\_\_