

CITY OF EVANS, COLORADO 1100 37TH STREET – EVANS, CO 80620 (970) 475-1170

TEMPORARY VENDOR INFORMATION SHEET

Business Name:	
Business Address:	
Business Owner's Name:	
Business Owner's Address:	
Business Phone No.	Cell Phone No:
Charitable Organization? Yes No	
If yes, provide your tax exempt number.	
Is your business a corporation? Yes No If ye	
Name of person managing business	Phone No
Proposed period of operation From:	To:
Hours and days of operation	
Price range of items to be sold	
Type of merchandise being sold	
Approximate value of inventory	
Location of proposed operation	
Will you be building or using any type of structure? Yes	
If yes, give a brief description	
One Day	\$ 25.00
One Week	\$ 50.00
One Month	\$ 75.00
Annually	\$ 100.00
City Business & Sales Tax License	\$ 25.00
Background check (in-state)	TBD
Background check (out-of-state)	TBD
I have read and understand the complete application a knowledge, the statement made in my application is true	· · · · · · · · · · · · · · · · · · ·
Signature of Applicant	Date:
(FOR CITY US	SE ONLY)
Background paperwork submitted: Yes No Issuance of License: Approved Disapproved_	Date: