## July 4<sup>th</sup> Fireworks Spectacular | Vendor Application

## Applicant's Information

Company/Organization Name					
Contact Name					
Business Street Address					
City	State			Zip	
Daytime Phone	Cell Pho	one			
Email Address		-			
Booth Information					
Snack/Beverages Vendors					
Truck Trailer UNITS MUST BL SPACE REQUIREMENTS (standard size is 10'x10') Truck/Trailer (including hitch) if applicable: L b Serving Window Side if applicable: Driver Other booth details:	y W		IED Passenger Side		
Please check all needs that apply:	п., г	<b>—</b>			
Is your company/organization a 501(c)(3) non-profit?	Yes	N	0 If YES, please attach	n a copy	y of IRS status form
Will you be asking for monetary donations?	es	No	If YES, a Non-solicitors	Permit	is required
Do you have a Maricopa County Health Permit? Yes	No	Licer	nse #		
Do you have a State of Arizona TPT License? Yes	No	Licer	ise #		
Do you have a City of Chandler Business License? Yes	No	Licer	nse #		

Units must be self- contained! NO POWER OR WATER will be available at this event Please provide a list of all items being sold and their price range.

Vendor Contribution Rate (please check the one that applies)

Snack/Beverages Sales - \$150.00

## Please read carefully and sign below.

I certify that the information contained in this application is true and correct to the best of my knowledge and belief and that I have read, understand, and agree to abide by the rules and regulations governing the proposed Special Event under the city of Chandler Municipal Code. Applicant agrees to comply with all requirements of the City, County, State, and Federal Government.

Signature	Date	
Printed Name		



## **Mailing Address**

Annette Watson Special Events Coordinator Mail Stop 498 P.O. Box 4008 Chandler, AZ 85244-4008 Cultural Development Special Events 480-782-2669 480-782-2713 Fax chandleraz.gov Hand Deliver Location

Chandler City Hall 175 S. Arizona Ave. 1<sup>st</sup> Floor Reception Desk Chandler, AZ 85225