

“Special Event” Occupational License **Acceptance Letter**

Congratulations! You have been approved as a vendor at the 2019 New Orleans Home & Garden Show held at the Mercedes-Benz Superdome from 3/15/19 – 3/17/19.

Please print, complete and submit the Supplement A form (below), along with a copy of this acceptance letter and a check or money order in the amount of \$50.00 payable to “City of New Orleans” to:

Michele Sigur
Bureau of Revenue- Special Events
1300 Perdido St. Rm. 1W15
New Orleans, LA 70112
(504) 658-1645
msigur@nola.gov

This is a Special Event occupational license that every vendor is required to have per the City of New Orleans. If you have any questions regarding the application, please contact Michele Sigur with the City of New Orleans at the above contact information. Those vendors who have already participated in a 2019 event in the City of New Orleans, and have purchased a 2019 “Special Event” occupational license, DO NOT need to re-apply. That license is good through 12/31/19.



Special Event
Related



Date	_____
Tracking Number	_____

SPECIAL EVENT PROMOTER/VENDOR

SUPPLEMENT A

THIS APPLICATION MUST BE SUBMITTED ALONG WITH THE MASTER SPECIAL EVENT APPLICATION

Choose your application type

Promoter (list of vendors must be attached)

Stationary Vendor (verification of participation from promoter must be attached)

APPLICANT CONTACT INFORMATION

Name _____ Title _____

Address _____ City _____ State ____ Zip _____

Phone _____ Email _____

BUSINESS INFORMATION

Trade Name _____

Tax ID/EIN # _____

Legal Name _____

Business Location _____

City _____ State ____ Zip _____ Phone _____

Mailing Address _____

City _____ State ____ Zip _____ Email _____

Legal Type of Business	Tax Status
Sole Proprietor (Individual)	For Profit
Partnership	LLC
Corporation	LLP
Other	Not for Profit

BUSINESS OWNER/OFFICER INFORMATION

Name _____ Title _____

Address _____ City _____ State ____ Zip _____

Phone _____ Email _____ DOB _____ Gender Male Female

Driver's Lic. No. _____ License State ____ SSN _____ Place of Birth _____

Name _____ Title _____

Address _____ City _____ State ____ Zip _____

Phone _____ Email _____ DOB _____ Gender Male Female

Driver's Lic. No. _____ License State ____ SSN _____ Place of Birth _____

Name _____ Title _____

Address _____ City _____ State ____ Zip _____

Phone _____ Email _____ DOB _____ Gender Male Female

Driver's Lic. No. _____ License State ____ SSN _____ Place of Birth _____



Special Event
Related



Date _____
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SPECIAL EVENT PROMOTER/VENDOR

SUPPLEMENT A

DESCRIPTION OF GOODS AND ADVERTISING

Describe the nature, character and quantity of the goods, wares or merchandise to be sold at retail or offered for sale at retail in the city and the value of such goods.

Describe the nature and character of the advertising to be done in order to attract customers.

PROMOTER PERMITS			ALCOHOL PERMITS		
Occupational License (required for all Promoters)	For Profit	Non-Profit	Special event alcoholic beverage permits can only be obtained by non-profit organizations or businesses with existing yearround ABO licenses at their brick and mortar locations.		
Promoter Permit (Exhibition)	\$ 250.25	\$125.25	Alcoholic Beverage Processing Fee	For Profit	Non-Profit
Promoter Permit (Event with Sales)	\$ 500.25	\$ 0.00	Beer Sales	\$ 50	\$ 25
Promoter Permit (Sport)	\$1000.25	\$ 0.00	Wine & Liquor sales	\$ 50	\$ 25
\$10,000 Performance Bond is required if a for profit promoter will have 3 or more vendors participating			Beer, Wine, and Liquor	\$100	\$ 50
VENDOR PERMITS			ENTERTAINMENT/FAIRS/SHOWS		
<ul style="list-style-type: none"> Stationary/Trade Show Vendor Occupational License \$50.00 			An additional license is required for the operation of a circus, carnival, concert, or other special event, including but not limited to gun shows, arts and crafts fairs, and antique shows. Temporary Entertainment For Profit: \$250.25 Non-Profit \$125.25		

3 BUSINESS REFERENCES (REQUIRED FOR PROMOTERS ONLY)

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

SIGNATURES INDICATE LICENSE/PERMIT APPLIED FOR

I certify that the above information is true and correct to the best of my knowledge. I understand that the City of New Orleans is authorized to suspend or revoke a permit or license issued under the provisions of its Municipal Code wherever a permit or license is issued in error or on the basis of incorrect, inaccurate or any false statement or misrepresentation, or in violation of any ordinance or regulation or any of the provisions of the City of New Orleans Municipal Code, the Comprehensive Zoning Ordinance, the International Construction Code or International Fire Code as adopted by the City of New Orleans. Fines and penalties for misrepresentation of material facts will be assessed in accordance with City of New Orleans ordinances and State of Louisiana Revised Statutes.

I understand that I must report any change in business ownership, operation, and/or address immediately.

Owner/Officer Signature _____ Title _____ Date _____