



## SPECIAL EVENT - SALES TAX APPLICATION

### TAXPAYER INFORMATION

Vendor Name \_\_\_\_\_  
 Trade Name \_\_\_\_\_  
 (If Applicable) \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 City | State | Zip code \_\_\_\_\_

### EVENT INFORMATION

1. Name of Event \_\_\_\_\_  
 2. Location of Event \_\_\_\_\_  
 3. Date(s) of Event \_\_\_\_\_  
 4. Nature of Business \_\_\_\_\_

Colorado State Sales Tax License # \_\_\_\_\_

*I declare under penalty of perjury in the second degree, that this application has been examined by me, that the statements made herein are made in good faith pursuant to Colorado tax laws and regulations and to the best of my knowledge and belief are true, correct and complete.*

Signature of applicant \_\_\_\_\_

Printed name \_\_\_\_\_ Date \_\_\_\_\_

Home phone \_\_\_\_\_ Business phone \_\_\_\_\_

Email address \_\_\_\_\_

### GENERAL INFORMATION

A tax license assigns you the right and the obligation to collect taxes for the City of Littleton, Taxes collected are monies held in trust by you. It is your responsibility to adequately account for and remit these funds.

**A SPECIAL EVENT TAX RETURN** is required to be filed after the event. The due date for the special event return is the 20th of the month following the event. If not remitted by the due date, there is a penalty of 10% , plus interest of 1% per month.

**Mail completed forms to:**

City of Littleton  
 Department of Finance  
 2255 W. Berry Ave.  
 Littleton, CO 80165

**If you have questions or need assistance, please contact:**

Rebecca DeHerrera	James Dufault
303-795-3956	303-795-3768
<a href="mailto:rdeherrera@littletongov.org">rdeherrera@littletongov.org</a>	<a href="mailto:jdufault@littletongov.org">jdufault@littletongov.org</a>