

RECEIPT NO. _____ LICENSE NO. _____

ACCOUNT #: **101.030.636** \$75.00 SPECIAL EVENT FEE

ACCOUNT #: **101.030.747** \$50.00 LATE FEE
IF LESS THAN 2 WEEKS BEFORE EVENT

CITY OF RACINE, WI HAWKER'S AND PEDDLER'S
SPECIAL EVENT APPLICATION

DATE ISSUED _____ EXPIRATION DATE _____ 501(C)(3) By Laws Submitted: YES _____ NO: _____

NAME OF BUSINESS OR NON PROFIT ORGANIZATION: _____

ORGANIZATION ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

ORGANIZATION TELEPHONE: _____

NAME OF CONTACT PERSON: _____

CONTACT PERSON HOME ADDRESS: _____ HOME TELEPHONE: _____

CITY: _____ STATE: _____ ZIP: _____

HOME TELEPHONE: _____

CONTACT E-MAIL ADDRESS: _____

CONTACT PERSON SIGNATURE: _____ DATE OF BIRTH: _____

FOOD BEING SOLD: YES _____ NO _____ IF YES, LIST TYPES OF FOOD: _____

ENVIRONMENTAL HEALTH DEPT. SIGN OFF: YES _____ NO _____ NOT REQUIRED _____

NAME OF SPECIAL EVENT: _____

LOCATION OF SPECIAL EVENT: _____

APPROVAL OF LOCATION GRANTED BY: _____

DATE(S) OF SPECIAL EVENT: _____

NUMBER OF VENDORS: _____

LIST OF ALL VENDORS SUBMITTED TO CLERK'S OFFICE: YES: _____ NO: _____

COMPLIANCE WITH CHAPTER 22-538 OF CITY OF RACINE MUNICIPAL CODE REQUIRED