

## City of Trinidad

135 North Animas
P.O. Box 880
Trinidad, CO 81082

Permit Fee: \$5.00

719-846-9843 719-846-4140 (fax)

## STREET STAND VENDOR PERMIT SANCTIONED EVENT

INSTRUCTIONS TO APPLICANT:	Fees are due and payable at the time of application.
SCHEDULED EVENT TITLE:  DATES OF EVENT:	TRINIDADDIO BLUES FEST  AUGUST 23-24, 2019
BUSINESS NAME:  BUSINESS ADDRESS:  CITY, STATE, ZIP:  PHONE NUMBER:	
STATE SALES TAX NUMBER: (A TYPE OF BUSINESS/PRODUCT:	ATTACH COPY OF CURRENT STATE LICENSE):
	SIGNATURE:

**RETURN TO:** 

City Clerk

City of Trinidad P.O. Box 880

Trinidad, CO 81082

Phone: 719-846-9843 ext. 125

Fax: 719-846-4140



DR 0098 (08/16/17)

COLORADO DEPARTMENT OF REVENUE

Denver, CO 80261-0013

Colorado.gov/Tax

# Special Event Sales Tax Return

#### General Information

#### **Special Event License Requirement**

A special event license must be applied for prior to an event. If you do not have a license, submit the Vendor Special Event License Application for Single or Multiple Events, DR 0589, available at Colorado.gov/Tax.

#### Who Must File

Vendors or organizers must file a return to remit the sales tax they collected at a special event. A special event means a retail sales event at a location where there are three or more vendors. If a farmer or retailer at a farmers' market sells prepared (ready-to-eat) food or other tangible property, that business should have a Colorado sales tax license. To apply for a standard sales tax license, complete the Colorado Sales Tax Withholding Account Application, CR 0100AP.

#### When To File

Returns are due by the 20th of the month following the date the event began. For example, if the event runs from June 30 to July 2, the return and tax are due July 20. Note: If this return and remittance is postmarked after the due date, a penalty of 10% plus 0.5% per month (not to exceed 18%) is due.

#### **Colorado Account Number**

If you have applied for your license, but do not have your account number, contact the Customer Contact Center at 303-238-7378 for assistance.

#### **Event Period**

Enter the dates from the beginning of the event to the end of the event as MM/YY-MM/YY.

#### **Location Jurisdiction Code**

Enter the six-digit location jurisdiction code for your site/location. The code can be found on your Special Event License under 'Liability Information' or in the Location/Jurisdiction Codes for Sales Tax Filing, DR 0800.

#### **County of Event**

Enter the county location of the event.

#### Service Fee (Discount)

A "discount" is given to vendors who timely file and pay their sales taxes. If your return and payment are postmarked and received timely, you can subtract the applicable service fee from your sales

tax due on line 10 of the return. Note: not all jurisdictions allow a service fee. Refer to the DR 1002 for more information.

#### Filing an Amended Return?

If you are filing an amended return, mark the amended return box. A separate amended return must be filed for each event. The amended return must show all lines as corrected, not merely the difference(s). The amended return replaces the original in its entirety.

#### **Recommended Forms and Resources**

- Resources available on the Colorado Taxation web site Colorado.gov/Tax
- Sales and Use Tax General Information and Reference Guide, DR 0099
- FYI Sales 4: Taxable and Tax-Exempt Sales of Food and Related Items
- FYI Sales 9: Sales Tax Licenses and Filing Requirements
- FYI Sales 55: Sales Tax Requirements for Flea Market and Swap Meet Operators
- Colorado Department of Revenue Electronic Funds Transferred (EFT) Program For Tax Payments, DR 5782
- Authorization for Electronic Funds Transfer (EFT) For Tax Payments, DR 5785
- Sales Tax Web pages
- The Colorado Business Resource Book, colorado SBDC.org

#### REVENUE ONLINE FILING INFORMATION

#### You can File Your Return Online!

To save time and to reduce filing errors, file your special event sales tax return using Revenue Online. Go to Colorado.gov/RevenueOnline and follow these steps:

- Under Quick Links, click on File a Return.
- Click on Special Event Sales Tax.
- 3. Read the information on the page, and then click Next.
- 4. A list of events will be sorted by location. Click on the Event Name for your event. If your event is not listed, there is an option to complete a blank form online by clicking on the 'Click here if the event you attended is not available' link.
- Follow the prompts and file your return.

Note: The forms are custom-made for each special event, including appropriate state-collected tax rates. Please make sure that you select the correct event. Online forms are not available for every special event.

If you cannot file through Revenue Online, complete this return in its entirety and mail with payment to:

Colorado Department of Revenue

Denver, CO 80261-0013

DR 0589 (08/16/18) COLORADO DEPARTMENT OF REVENUE Registration Center Section - Room 102 PO Box 17087 Denver, CO 80217-0087

# Sales Tax Special Event Application

Account Number

00.

			Purpose					
1. Do you have a sales	s tax account in (	Colorado?	Yes	No	YES, Account Num	ber	п	
2. Event Location (City in w	hich your event is be	n which your eve	nt is being he	ld	ZIP			
3. Indicate Type of Org	ganization							
Individual	Government							
General Partnersh	ip Limited L	iability Partnership (	LLP) Ass	sociation			Joint Venture	
Limited Partnership	Corporati	on/'S' Corp.	Est	ate/Trust			Non-profit	
		Busine	ess Informati	on				
1. Taxpayer Last Name (ow	ner, partners or othe	r business organiza	tion) First	Name			Middle Initial	
2. Trade Name/Doing Busin	ness As (if applicable	)						
3a. City in which your busine	ss is located		· ·		State	ZIP		
3b. County in which your bus	siness is located							
4. Mailing Address (residence	e address, include uni	t number) City			State			
County		FEIN			SSN			
5. List specific products you	provide (Explain in l	Detail).						
Own	nership (If there a	ero other partner	e liet on cons	rate cheet i	seing the same 6	A		
(1) Last Name or Business N		First Name	s, list on sepa	Middle Initial	SSN			
1a.								
Address (residence or P.O. bo	City		State	ZIP	Telephone			
(2) Last Name or Business N 2a.	First Name		Middle Initial	SSN				
Address (residence or P.O. bo <b>2b.</b>	City		State	ZIP Telephone				
			Sales			_		
Make checks	Mark The Box Th	at Applies To You	Period o	f Event		Fee	S	
payable to:			From (MM/YY)	To (MM/YY)	(No Ca		ish)	
Colorado Department Single of Revenue		le event			Single Event License 0120-750 (999) \$		¢	
		ple event			Multiple Event Lie		Ψ	
Denver, CO 80217-0087		pic event					\$	
Signature of Owner, Partner o		Title			Date (MM/DD/YY).			
declare under penalty or perj	jury in the second de	gree that the statem	ents made in thi	s application	are true and complet	e to the	best of my knowledge.	
The State may convert your the same day received by the uncollected funds, the Depart	e State. If converted, your	check will not be returned.	If your check is reject	ed due to insuffic	ient or	ount O	wed	



DR 0098 (08/16/17)
COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0013
Colorado.gov/Tax

### **Special Event Sales Tax Return**

Mark if Amended Retu	rn	•	0022	-101	SSN	100			FEIN	11 501			
L. Alexandre			BIOGESTION .	Final N	la ma	Rai.		74.3	Dhana Nu		= 150		La rie
Last Name or Business Nam	е		2000	First N	lame		THE ACTUAL SOLES		Phone Nu	mber			13 12
Colorado Account Number (xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx				Event	Period (MM//YY-N	/M//Y	(Y) Location Juris C	ode	(Refer to form DR 0800) Due Date (MM/DD/YY)				
Name of Event	14/11	gh. =20=1	77 947			A 31	County of Event		Mercey Ar fo		500	A TOPE OF	1991
Traine or Event												200 000 000	
			350 L S 1				Oit.			01.1	100 -		** = = 1
Event Location Address	Second Second		411			l H	City			State	1 2	ip	
	(1-4)												
1. Gross Sales	(2-4)												00
<ol><li>Sales to other licensed dealers</li></ol>	(2-4)												00
3. Subtract													1
line 2 from line 1		7 [											00
RTD CD RT	1	MHA State	PSI	HSD	MDT RTD/CD	Т	Special Distric	t:	County/i	MTS		City/LID	
4. Net Sales: Enter Amount from line 3 in		Otat			KIDIOD	$^{\dagger}$	Opeoidi Dioti i		Gountyn			Olty/LID	Т
ALL applicable columns			00		C	0		00		C	0		00
E Everations			00					00					00
5. Exemptions 6. Net taxable sales	(4-1)		00	(4-2)		00	(4-3)	UU	(4-4)		0 (4-	-5)	00
(subtract line 5 from line 4)	1					İ	, ,		- Parameters		<u> </u>	-/	٦
•			00			0		00		C	0		00
7. Tax rate													
8. Amount of sales tax								00					00
(line 7 multiplied by line 6)	_		00	-		00		UU		-	0		00
9. Service fee rate			00		c	00		00		C	0		00
10. Service fee (discount)	(8-1)	200		(8-2)	E 15 7/16 (		(8-3)		(8-4)		(8-	5)	
(line 9 multiplied by line 8)			00			00		00		0	0		00
11. Sales tax due	(11-1)		00	(11-2)	RESERVE		(11-3)	00	(11-4)		(11	-5)	00
(subtract line 10 from line 8)						Ī							
•		SILICATE	00	1 - 1	0	00		00	(40.4)	0	0	.	00
	(12-1)			(12-2)		1	(12-3)		(12-4)	1250	(12	-5)	
12. Penalty			00		C	00		00		0	0		00
	(13-1)			(13-2)		0	(13-3)		(13-4)		(13	-5)	
13. Interest			00			00		00		0	0		00
14. Total each tax													
(add lines 11, 12 & 13)			00			00		00	Total A	0	0		00
The state may convert your check to a one time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.  15. Total Amount Owed (355)								\$					
Signature (Signed under	penalty o	or perjury in	the second	degree.)	THE LEWIS	3	Date (MM/DD/YY)	1					
													1 3