City of Castlewood

Farmer's Market VENDOR LICENSE APPLICATION

Applicant's Name:_____

Applicant's Permanent Address:_____

City:_____State:_____Zip:_____Cell#:_____

Business Name:_____

Business Address:_____

City:_____State:_____Zip:_____Phone Number:_____

Sales Tax License #_____

Must have a copy of South Dakota State Sales Tax Form—this is not an option

Permit Dates: Start_____ End_____

Types of Goods, Merchandise, Services:_____

This permit allows you to transact business between in City of Castlewood City Limits

This permit must be kept with the authorized person or at the place of business and must be shown when requested.

Castlewood Days Vendors must pay an additional $10.00 fee to Castlewood Days Committee, this does not cover selling on the Saturday of Castlewood Days.

Please attach a check or cash in the amount of $25.00 to the City of Castlewood and return this form with payment to the finance officer 204 E Main St. Castlewood, SD 57223

If the finance officer is out, there is a dropbox.

_____ _____

Applicant's Signature **Finance Officer Signature**

Fee: $25/year_____Paid_____ **Date_____**