



601 East Main Street, Johnson City, TN 37601

**Business Tax Transient Vendor's License Application**  
**(Special Events)**

Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Event Dates: From: \_\_\_\_\_ to: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Representative: \_\_\_\_\_

Business Phone No: \_\_\_\_\_

Federal Employers ID: \_\_\_\_\_

Drivers License No: \_\_\_\_\_

**(Copy must be attached)**

Products to be Sold: \_\_\_\_\_

**Fee: \$50.00** **Method of Payment: Cash, Cashier's Check or Money Order Only**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Collections Official: \_\_\_\_\_ Date: \_\_\_\_\_