



Business License Division  
1339 Main Street (1<sup>st</sup> Floor) Columbia, SC 29201 • Phone: 803-545-3345  
P.O. Box 147 Columbia, SC 29217

## Group Event License Application

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

Event Location\_\_\_\_\_Date\_\_\_\_\_

Purpose of Event\_\_\_\_\_

Name Of Sponsor Promoter or Producer\_\_\_\_\_

\_\_\_\_\_

Address\_\_\_\_\_

City/State/Zip Code\_\_\_\_\_

Phone (Business)\_\_\_\_\_Cell\_\_\_\_\_

Contact for Day of Event\_\_\_\_\_Cell\_\_\_\_\_

Tax ID/Social Security\_\_\_\_\_

List of items to be sold by sponsor/promoter/producer if any (shirts, beer, soda, food, etc.)\_\_\_\_\_

Estimated Gross Receipts \$\_\_\_\_\_ # of Exhibitors\_\_\_\_\_

IMPORTANT: THIS APPLICATION WILL NOT BE ACCEPTED UNTIL THE  
ADDITIONAL INFORMATION REGARDING VENDORS IS COMPLETED.



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Group Event License Application (continued)

This Group Event License will cover the license and decals for all of your vendors for the duration of your event. Each vendor will be assigned an event decal. Decals are valid for one (1) event per year. Multiple event participants will be required to have a business license. Food Vendors must collect, report, and remit the City of Columbia Hospitality Tax. (See attached)

Rate Schedule:

Promoter-single annual event, not more than ten (10) days in length;
On gross income from space rentals, ticket sales up to \$10,000.00
or up to 25 exhibitors, whichever is greater.....\$100.00
additional revenue of \$10,000.00 up to \$150,000.00 or additional
25 exhibitors.....\$35.00
On gross income over \$150,000.00 or over 250 exhibitors, whichever
is greater.....\$500.00

To obtain a license for an event as described above, the promoter shall make application to the business license division not less than ten (10) days prior to the beginning of the event. The application must contain the following information: name of the promoter, dates and location of the event, purpose for the event and a detailed list of participants or exhibitors.

- 1. The undersigned swears or affirms that he/she has completed and/or reviewed all information in this application and that all information contained herein is true and accurate.
2. The undersigned further acknowledges that giving false information in this application or any addended or supplemental forms constitutes cause for denial and revocation of the application or license AND subjects him/her to criminal prosecution for perjury.
3. The undersigned acknowledges the duty and agrees to update and correct this information as it changes.

The undersigned understands and authorizes the jurisdiction and its agents to utilize the information on this application to ensure all other federal, state, and local laws are complied with.

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



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Vendor Questionnaire

Required for all vendors of Group Event Permits

If you have a City of Columbia Business License, please fill out questions 1-3 and return to the promoter. If you do not have a City of Columbia Business License, please fill out the entire form.

- 1. Vendor Business Name
2. City of Columbia License Number
3. Has there been any changes to your business? If yes, please contact our office.

For Vendors who do not have a City of Columbia Business License:

- 4. Physical Location of Business
5. Mailing Address (if different)
6. Type of Vendor (what are you selling)
7. Estimated Gross for this event \$
8. Owner's Full Name
9. Phone Number
10. Email Address
11. Commissary Kitchen Name and Address (if Food Vendor)

I understand that under the umbrella of the promoter's Group Event Permit, that I can participate in only one event per year. Any additional events in the City of Columbia will require a business license for my business.

I understand that if I am selling any prepared food and/or beverages, that I must collect, report and remit City of Columbia Hospitality tax (2% gross revenue) to the City of Columbia.

I understand that I am paying an estimated Hospitality Tax up front and will report my actual gross to the city by the 20th of the month following this event. If there is a balance due the city, I will be invoiced for the additional tax.

I understand the ordinance (2003-017, 1, 4-23-03) regarding Hospitality Tax and the penalties for nonpayment

Signature Date

Estimated Hospitality Tax Levels: less than \$1000 gross- \$20.00
\$1001-\$3000 gross-\$60 ; \$3001-\$5000 gross-\$100



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