

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration

**Division of Taxation**

SALES TAX SECTION

One Capitol Hill, Providence, RI 02906-5800



**Office Use ONLY:**

|       |                |
|-------|----------------|
| Date: | Permit Number: |
| By:   | Reviewed By:   |

**PROMOTER'S APPLICATION FOR PERMIT**

To Operate a "SHOW"

Under the Sales and Use Tax Act, Effective May 11, 1978

***No Fee Required***

Every promoter of a show shall, at least ten (10) days prior to the opening of each such show, file with the Tax Administrator a notice stating the location and dates of such show, in a form prescribed by the Tax Administrator. The Tax Administrator shall, within five (5) days after receipt of such notice, issue to the promoter without charge, a permit to operate such show. No promoter shall operate a show without obtaining such permit. Such permit shall be prominently displayed at the main entrance of the show. A person who engages in business as a promoter in this state without a permit shall be guilty of a misdemeanor. NOTE: A separate permit is required for each show in Rhode Island.

|                                                                                                                                                                                                                                                                                                                      |                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| 1. Name of Promoter (Please Print or Type)                                                                                                                                                                                                                                                                           | 2. Federal Identification No.                                        |
| 3. Home Address of Promoter                                                                                                                                                                                                                                                                                          | 4. Business Phone No.                                                |
| <b>Location of "SHOW"</b><br>The address at the right will be used as our official mailing address to which permits and other communications with respect to the sales and use tax will be mailed. IN CASE OF ANY CHANCE IN LOCATION NOTIFY THE TAX ADMINISTRATOR.                                                   | 5. Location of Show                                                  |
|                                                                                                                                                                                                                                                                                                                      | 6. Street Address of Show                                            |
|                                                                                                                                                                                                                                                                                                                      | 7. City or Town                      State                      Zip  |
| <b>Mailing Address</b><br>If mailing address is different from location shown above, insert the address at the right which is to be used as your official mailing address to which any communications with respect t the sales and used tax will be mailed. If this is the same as above, enter "same" on each line. | 8. Name                                                              |
|                                                                                                                                                                                                                                                                                                                      | 9. Street Address or Box No.                                         |
|                                                                                                                                                                                                                                                                                                                      | 10. City or Town                      State                      Zip |
| 11. What dates will show operate at this location?                                                                                                                                                                                                                                                                   |                                                                      |
| The undersigned hereby makes application for a permit(s) under the Sales and Use Tax Act, and certifies that the information given on this form is true and correct to the best of his or her knowledge and belief.                                                                                                  |                                                                      |
| Date:                                                                                                                                                                                                                                                                                                                | Signature of Promoter:                                               |
|                                                                                                                                                                                                                                                                                                                      | Title:                                                               |

Beverly @ Division of Taxation: 574-8850