

CHECOTAH CHAMBER OF COMMERCE

53rd Old Settlers Day - Food Concession Application

When: Saturday June 8, 2019

Where: Downtown Checotah, OK

Vendor Name: _____

Address: _____ City: _____ State: _____ Zip _____

Phone: _____ Cell _____ Email _____

| Food you plan to sell: | Price Range | Electrical Outlet Needed? |
|------------------------|-------------|--|
| 1. _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> 110 <input type="checkbox"/> 220 |
| 2. _____ | _____ | <input type="checkbox"/> 50 amp _____ # of plugs |
| 3. _____ | _____ | |

Space Size: 22 Ft. **Cost:** \$50.00

Please return this form with your check payable to Checotah Chamber of Commerce.

Mail to: P.O. Box 424, Checotah OK 74426 no later than June 4, 2019. **FIRST PAY BASIS**

All Food Vendors must have all permits and liability insurance required by the law. Your facility will be inspected by the local health inspector before you will be allowed to open for business. You Must Send your Oklahoma Food License with your application.

Please provide a copy of your Oklahoma State Sales Tax Permit Number _____

| | | |
|--------------------------------|-------|---|
| Oklahoma State Sales Tax Rate | 4.5% | |
| McIntosh County Sales Tax Rate | 2.0% | |
| Checotah City Sales Tax Rate | 4.0% | |
| OK Tourism Tax | .001% | **Total Sales Tax to be collected 10.5% |

At the start of the event, the Checotah Chamber of Commerce will provide a Vendor Daily Sales Tax Report to each vendor who does not provide an Oklahoma Sales Tax permit number. With or without a Tax Permit number, you will handle your own reporting & payment.

Old Settlers Day activities start at 9:00 a.m. and the parade starts at 3:00 p.m.

ACKNOWLEDGEMENT: By signing this application you are acknowledging that you have read and understand the information on this application and attached letter for Checotah's Old Settlers Day Festival.

Call us with any questions at 918-473-2070.

Jerri Holder, Office Manager, Checotah Chamber of Commerce.

Sign Here _____

Food Concession Vendor

Date