

**City of Norfolk**  
**Application for Special Event Business License**

**New Applicant**     **Renewal – Account # \_\_\_\_\_**

Applicant Name & Mailing Address

Trade Name & Business Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Social Security # or Federal ID#:(required)\_\_\_\_\_

Phone Number: (\_\_\_\_)\_\_\_\_\_ Email:\_\_\_\_\_

**Description of business activity:**

- |                          |   |          |                  |
|--------------------------|---|----------|------------------|
| <input type="checkbox"/> | Non-food Vendor   | \$50.00  | <u>999100-01</u> |
| <input type="checkbox"/> | Non-food Vendor - games, rides, etc.<br>10% admissions tax required | \$50.00  | <u>999100-01</u> |
| <input type="checkbox"/> | Food Vendor – Food sold prepackaged                                 | \$50.00  | <u>999101-01</u> |
| <input type="checkbox"/> | Food Vendor – Prepared foods<br>(6.5% meals tax required)           | \$50.00  | <u>999101-01</u> |
| <input type="checkbox"/> | Itinerant Merchant or Show Promoter                                 | \$500.00 | <u>999300-01</u> |
| <input type="checkbox"/> | *Scope Promoter ( <b>please call for license fee</b> )              |          | <u>999300-02</u> |

**Event name:**

**Event Date:**

- |          |       |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |

This information is true and correct to the best of my knowledge.

Name (Print)\_\_\_\_\_ Title\_\_\_\_\_

Signature\_\_\_\_\_ Date\_\_\_\_\_

**Please notify this office if any of the above information changes**

Phone 757-664-7886 - Fax 757-441-1346

**ENCLOSE FEE - payable to Norfolk City Treasurer**

**\*\*payments over the phone or online are not accepted for special events\*\***

Return to: Special Events, Commissioner of the Revenue,  
P O Box 2260, Norfolk, VA 23501-2260