

**PARKE COUNTY SPECIAL EVENTS LICENSE 2015**  
**TRANSIENT MERCHANTS LICENSE (TML)**  
**NON-REFUNDABLE**

**SECTIONS A & B MUST BE COMPLETED AND SIGNED**

**METHOD OF PAYMENT: CASH, MONEY ORDER, OR CASHIER'S CHECK ONLY: SEE FEES LISTED BELOW**

**SECTION A: BUSINESS OWNER/PRINCIPAL CONTACT INFORMATION:** This application is for:

Individual  Partnership  Company  Limited Liability Company  Corporation

(If a corporation or limited liability company, provide state \_\_\_\_\_ and year \_\_\_\_\_ incorporated or organized)

**PLEASE PRINT CLEARLY**

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

**Owner/Contact Person:** \_\_\_\_\_

Home (Permanent) Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Social Security Number or Tax I.D. Number: \_\_\_\_\_

**SECTION B: TML ACTIVITY INFORMATION**

TML activity location (in which town will you be conducting business?): \_\_\_\_\_

Property Owner (who you rent space from): \_\_\_\_\_

Dates of operation: \_\_\_\_\_ Structure for activity is (circle one): Permanent - Mobile - Temporary

Type of merchandise/product being offered (describe in detail): \_\_\_\_\_

Estimated gross receipts during license period (to the best of your knowledge): \$ \_\_\_\_\_

Is applicant claiming an exemption from the license fee? (circle one) YES - NO If yes, indicate one of the following:

\_\_\_\_ Indiana non-profit organization (please include non-profit number) \_\_\_\_\_

\_\_\_\_ **Indiana** resident who is a veteran, qualified under **IC 25-25-2-1** (must provide a copy of their DD-214)

\_\_\_\_ **ALL** products are handmade by **MYSELF**. \_\_\_\_\_ Other: \_\_\_\_\_

The undersigned affirm, under the penalty of perjury, that the representation and answers in the application are true.

**SIGNATURE:** \_\_\_\_\_ **PRINTED NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Cell Phone Number (\_\_\_\_\_) \_\_\_\_\_ PLEASE DISPLAY TML LICENSE IN BOOTH**

**REPRESENTATION AND PROMISES**

The business and the person signing this form represent that:

Neither is delinquent to the county for any taxes, license fees or any other debt.

The person signing this form has the authority to do so.

The business and the person signing this form agree that:

Each will comply with all applicable laws, ordinances, regulations, orders and decisions of public officials.

The license may be suspended if any applicable laws, ordinances, regulations, orders or decisions are violated.

The business and the premises on which the business is located will not be used for any unlawful purpose.

*A copy of this application will be submitted to the Indiana Department of Revenue*

**Parke County works in conjunction with state and federal authorities to fight counterfeiting. Any vendors found to be selling counterfeit or stolen merchandise will have their permit(s) revoked and will be barred from future Parke County festivals. The U.S. Department of Homeland Security will determine criminal violations under Title 18 United States Code, Section 2320 Trafficking in Counterfeit Goods and Services.**

**TO BE COMPLETED BY COUNTY OFFICIALS:**

License Fee \$ \_\_\_\_\_ (\$100.00 if not exempt) License Number 2015: \_\_\_\_\_

Processing Fee \$ \_\_\_\_\_ (\$20.00 for persons who do not pay Parke County real estate property taxes or reside in Parke County ~ All Indiana Veterans are exempt from this fee)

Penalty \$ \_\_\_\_\_ (\$50.00 after Sept. 30, 2015 for all vendors applying for a TML)

**TOTAL** \$ \_\_\_\_\_

Exempt Yes / No Exemption Reason: \_\_\_\_\_ Issued by: \_\_\_\_\_

Circle one: CASH - MONEY ORDER - CASHIER'S CHECK Date Issued: \_\_\_\_\_

MAIL\_\_ WALK -IN\_\_ ON-SITE\_\_ PICK-UP\_\_ TML MAILED\_\_

**NO BUSINESS OR PERSONAL CHECKS WILL BE ACCEPTED**

**MAKE MONEY ORDERS OR CASHIER'S CHECKS PAYABLE TO: PARKE COUNTY AUDITOR**

SEND **ENTIRE** FORM AND PAYMENT TO:

Parke County Auditor  
116 West High Street, Room 104  
Rockville, IN 47872

[www.parkecounty-in.gov](http://www.parkecounty-in.gov)

**INCOMPLETE APPLICATIONS AND/OR APPLICATIONS WITHOUT CORRECT FEES INCLUDED WILL NOT BE PROCESSED**

For questions call (765) 569-3422 or e-mail: [tmlinfo@parkecounty-in.gov](mailto:tmlinfo@parkecounty-in.gov)