Nevada Department of Taxation

Promoter Application and Exhibitor List

Prepared By _____

Nature of Event _____

Email as attachment to: Carson City: ccevents@tax.state.nv.us
Reno renoevents@tax.state.nv.us
Las Vegas - Henderson: lvevents@tax.state.nv.us

ALL INFORMATION MUST BE COMPLETE

Section One

Promoter Info:

Company Name		**Contact Info:**	
Address		**Contact Person**	
City, State, Zip		**Primary Phone**	
EIN	Organization Type	**Cell Phone**	
Nevada TID		**E-mail**	

Section Two

Event Info:

Name of Event		**Date of Request:**	
Event Location		**Event Start Date:**	
Address		**Event End Date:**	
City, NV, Zip		**Returns Due by:**	
		Will this be a Recurring Event?	Yes / No

Section Three

Exhibitor List: **As of Date:**

Provide information on every participant at the event, sellers and non-sellers.
Vendors (Sellers) must remit a One-Time Return at the end of the event.

Dept Use

Business Name	Contact Name	Street Address	City State, Zip	Phone	E-mail	If vendor is Registered in NV Tax ID #	Selling Vendor? Y or N

Please use this spreadsheet or attach your own exhibitor list in a similar format with the requested information and seller declarations.

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