



**RECURRING EVENT
VENDOR PERMIT APPLICATION
VILLAGE OF LOS RANCHOS**

www.losranchosnm.gov

6718 Rio Grande Blvd NW Los Ranchos, NM 87107

Phone: 505-344-6582

FEE: \$20.00

License Valid for Calendar Year Issued

| | |
|----------------------------------|----------------------------------|
| Name of Business: | Owner: |
| Email: | |
| Phone Number of Vendor: | |
| Event Address: | |
| EVENT CONTACT INFORMATION | |
| Contact Name: | |
| Phone Number: | Emergency Contact Number: |

| Directions for Registration | STATE GROSS RECEIPTS INFORMATION | |
|--|---|-------------------|
| 1. All fields are to be filled and verified. 2. Copies of Food Permit must be attached (if applicable) 3. Copy of CRS-1 Certificate should be attached. 4. Business license where registered. NOTE TO VENDOR: Los Ranchos Tax is 7.3125% Los Ranchos reporting GRT Code is 02-200 | Business name as it appears on CRS certificate | |
| | CRS# | |
| | _ _ _ _ _ | |
| | Zipcode Registered Under: | |
| | Last 4 numbers of FEIN or SSN: | |
| | FOR OFFICIAL USE ONLY | |
| FOR OFFICIAL USE ONLY | | |
| <input type="checkbox"/> Application | <input type="checkbox"/> Copy of CRS-1 | Date Valid: _____ |
| <input type="checkbox"/> Copy of Food Permit | <input type="checkbox"/> Business License | |

I certify, that to my knowledge, this is a true and accurate application.

Print Name: _____

Signature: _____

Date: _____