



## APPLICATION FOR GROUP EVENT LICENSE

Name of Sponsor, Promoter, or Producer: \_\_\_\_\_

Address: \_\_\_\_\_

City/County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Bus): \_\_\_\_\_ Phone (Cell): \_\_\_\_\_

Tax ID or Social Security: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Specific Purpose of Event: \_\_\_\_\_

List of items sold by sponsor, promoter, or producer, if any (ex: shirts, beer, soda, food, etc): \_\_\_\_\_

\_\_\_\_\_

# of Exhibitors \_\_\_\_\_ License Fee \$ \_\_\_\_\_

**IMPORTANT: THIS APPLICATION WILL NOT BE ACCEPTED UNTIL THE REVERSE SIDE OF THIS FORM IS COMPLETED REGARDING VENDOR INFORMATION.**

I certify that all statements of this application are true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Sponsor, Promoter or Producer

\_\_\_\_\_  
Date

City of Beaufort Business License  
1911 Boundary Street  
(843) 525-7025 Phone  
buslicense@cityofbeaufort.org

**GROUP EVENT LICENSE  
VENDOR LIST**

**NAME OF EXHIBITOR/VENDOR**

**ADDRESS**

**TELEPHONE**

**TYPE OF GOODS  
SOLD**

1 \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

2 \_\_\_\_\_

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3 \_\_\_\_\_

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4 \_\_\_\_\_

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5 \_\_\_\_\_

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6 \_\_\_\_\_

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7 \_\_\_\_\_

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8 \_\_\_\_\_

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9 \_\_\_\_\_

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10 \_\_\_\_\_

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11 \_\_\_\_\_

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12 \_\_\_\_\_

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13 \_\_\_\_\_

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14 \_\_\_\_\_

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**GROUP EVENT LICENSE  
VENDOR LIST**

**NAME OF EXHIBITOR/VENDOR**

**ADDRESS**

**TELEPHONE**

**TYPE OF GOODS  
SOLD**

15 \_\_\_\_\_

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16 \_\_\_\_\_

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17 \_\_\_\_\_

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18 \_\_\_\_\_

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19 \_\_\_\_\_

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20 \_\_\_\_\_

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21 \_\_\_\_\_

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22 \_\_\_\_\_

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23 \_\_\_\_\_

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24 \_\_\_\_\_

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25 \_\_\_\_\_

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