

FEE permit
 NO FEE permit



City of Cascade P.O. Box 649
(208) 382-4279 Cascade, ID 83611

APPLICATION FOR PERMIT

- | | | |
|--|---|---|
| <input type="checkbox"/> Vendor | <input type="checkbox"/> Event (under 75 people) | <input type="checkbox"/> Amplified Sound |
| <input type="checkbox"/> Catering / Alcoholic Beverage | <input type="checkbox"/> Fireworks
<input type="checkbox"/> Stand <input type="checkbox"/> Display | <input type="checkbox"/> Nighttime Lighting |

ALL SHADED AREAS to be filled in by City Officials

<i>Rcvd</i>	<i>Iss</i>	Document #
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Applicant Name		DBA Name	
Liquor Licensee Name		State Alcohol license #	Year
Name of Event <small>Catering permit with Alcohol is subject to provisions of Title 23-L.C.</small>			
Dates Requested	Begin	End	# Attending Event
Hours of Operation		m.	to
Product(s) to be Sold		Fed. Tax ID # or SSN #	
Is a food service to be provided?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Idaho State Tax ID #
		DL #	

Proposed Location _____ is located on Private Property Public Property

Do you own the property at the location? Yes No Are you leasing or renting this space? Yes No

Applicant Name	Prop Owner/Lessor Name
Home Address	Mailing Address
Mailing Address	Phone #
Phone #	Cell #
Cell #	Email Address
Email Address	Please submit a signed copy of letter of approval <input checked="" type="checkbox"/> Rcvd.
or lease/rental agreement from property owner/Lessor.	

On site parking	<input type="checkbox"/> Yes <input type="checkbox"/> No	# of spaces	City Water	<input type="checkbox"/> Yes <input type="checkbox"/> No
Signing added or changed	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explain type	City Sewer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Electricity being used	<input type="checkbox"/> Yes <input type="checkbox"/> No	Propane being used	Septic?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Porta Potty #	Trash Can or Dumpster?	

Where a blue box is checked "Yes", the Applicant must obtain signatures from those authorities who will review the Applicants compliance with City Code.

Building and Code Enforcement Yes No

Signature Date

Public Works Director Yes No

Signature Date

Fire Chief Yes No

Signature Date

Sheriff's Office Yes No

Signature Date

NOTICE of required collection of Local Option Non Property Tax (LOT) effective January 1, 2022.
The City of Cascade collects a 1% LOT on single item sales up to \$1,000.00 as defined in Cascade City Code, Title 4, Chapter 7.

The applicant hereby makes application for a City Sales Tax Collection Permit as required under Cascade City per Ordinance No. 711. Read and initial each section below even if you do not have items subject to taxation under Idaho Code 63-3601 and City Ordinance No. 711.

_____ Retail businesses to collect a one (1%) tax upon all retail sales subject to taxation under Idaho Code 63-3601, et. Seq. Idaho Sales Tax Act and per Cascade City Code, Title 4, Section 8. Single item purchases of \$1,000.00 and over are exempt.

_____ Collection of one (1%) tax on admission to a place or for an event in Idaho, provided that an organization conducting an exempt function as defined in section 527 or exempted by section 501c(3) of the Internal Revenue Code, as incorporated in section 63-3004, Idaho Code and as defined in City of Cascade code, 4.8.1.

_____ The undersigned agrees to submit a local option non property tax return for each calendar month by the 20th of the following month All LOT tax vouchers may be remitted to the City Clerk's Office at City Hall, 105 S. Main Street, Cascade, Idaho 83611.

_____ The undersigned agrees to include a copy of State tax voucher/s when submitting the City of Cascade LOT remittance voucher.

A nonrefundable fee for the administrative costs of processing applications shall be paid IN ADVANCE by each applicant at the time of making application for any permit in an amount set by City Resolution.

Short Term Vendor-Special Event-3 day	<input type="checkbox"/>	\$	50.00 per day	Concessionaire Permit (Commercial)	<input type="checkbox"/>	\$	100.00
Seasonal Vendor - four month permit.	<input type="checkbox"/>	\$	100.00	Payment via	TOTAL	\$	
Catering Permit per day () days x \$25		\$	<i>NTE 5 Days</i>	Payment via cc, ck, csh	DATE PAID		

NOTICE In accordance with county or state requirements, separate permits / licenses may be required. This permit / license becomes null and void if you are not in compliance with City of Cascade requirements. Copies of all required and current state and county licenses or permits must be submitted with this application. Rcvd.

I agree to hold the City of Cascade harmless of and from any and all liability, cost and damage arising from this event, including court costs and attorney's fees. I, the undersigned, accept full financial responsibility for any damage to property. I also agree to abide by the Vendor Rules for Use as required.

Fireworks: A current certificate of insurance naming the City of Cascade as an Additional Insured, as required in Ordinance No. 718 Title 5-5-4 and Title 5-5-5 B, in the amount of \$1,000,000.00 is required when submitting this application. Rcvd.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions and ordinances governing this type of business will be complied with whether specified herein or not. The granting of a license or permit does not presume to give authority to violate or cancel the provisions of any other federal or state or local law or rules regulating this type of business.

Print Name of Authorized Agent

Print Name of Owner

Signature of Authorized Agent

Date

Signature of Owner

Date

Mayor, City of Cascade

Date

Attest: Signature of the City Clerk, City of Cascade

Date



