

**RETURN BY MAIL: FOR OFFICE USE:**

108 W. Main Street
Little Chute, WI 54140
Questions: vendors@marketonmainlc.com
Village of Little Chute: (920) 423-3868

Date Received: _____
Cash: \$_____ Check #: _____
PLEASE MAKE CHECKS PAYABLE TO:
Village of Little Chute (Memo: Market on Main)

VENDOR APPLICATION

Market hours are 2:00 p.m. to 8:00 p.m. on September 14, 2024
Setup begins at 12:00 pm

CONTACT NAME			
BUSINESS NAME (if applicable)			
SOCIAL MEDIA (if applicable)		WEBSITE (if applicable)	
PHONE		EMAIL	
ADDRESS (individual or business)			
CITY		STATE	ZIP CODE

BOOTH INFORMATION:

Please provide a detailed description of specific items to be sold or activities to take place ("crafts" is not sufficient) for Market on Main. Use a separate sheet of paper if needed. Please include pictures with the application if possible.

☐ Single Space (10' x 10') Do you need to sell from a vehicle or trailer? ☐ Yes ☐ No Explain: _____

VENDORS ARE REQUIRED TO FILL OUT THE WI-DOR S-240 VENDOR INFORMATION ATTACHED.
APPLICATIONS WILL NOT BE ACCEPTED IF NOT INCLUDED.

PAYMENT:

Accepted 2024 Market on Main Vendor Fee = **\$75**

Village of Little Chute Business Market on Main Vendor Fee = **\$25**

PLEASE DO NOT SEND PAYMENT UNTIL APPROVED & INSTRUCTED TO DO SO

I have read and agree to follow all Market on Main rules and guidelines.

VENDOR SIGNATURE: _____ DATE: _____



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★ ★ WI-DOR Vendor Information - Must be completed and turned in with application. ★ ★

If the vendor does not have a Wisconsin seller permit number and claims their sales are tax exempt, enter the exemption code number provided by the vendor.

- 1- Exempt sales only or display only 3- Nonprofit occasional sales exemption
 2- Multi-level marketing company pays sales tax 4- Exempt occasional sales

Wisconsin Seller's Permit Number (456-) <u>456-</u>	SSN (Last 4 digits)	FEIN (Last 4 digits)	Exemption Code
Legal Business Name (if not sole proprietor)	Doing Business As (DBA) Name (if applicable)		
Vendor/Contact Name (Last)	Vendor Contact Name (First)		Vendor Phone Number
Mailing Address	Email Address		
City	State	Zip	Multi-Level Marketing Company (If claiming Code 2 above)