Return Completed Form To: **Planning and Zoning** 108 Sherman Street Deadwood, SD 57732



Questions Contact: **Jeramy Russeli** (605) 578-2082 or jeramyr@cityofdeadwood.com

Application Date: <u>(0-4-202/</u>

APPLICATION FOR TEMPORARY VENDORS LICENSE

The Deadwood Zoning Administrator and Planning & Zoning Commission review all applications.

Applicants: Application must be received 60 days prior to start of event	. Please read thoroughly prior to
completing this form. Only complete applications will be considered for rev	<u>iew.</u>
Applicant: Lacy Blair, LMT T	elephone: (308) <u>530 - 8919</u>
Name of Business: T	elephone: ()
Applicant's Mailing Address: 202 Sunnyill Rd Lead City	SD 57754 State Zip
Please select your type of vending:	
* Outside of a Structure – \$750.00	
* Inside of an Existing Structure – \$250.00 💢	_
For a period of fourteen (14) days: Beginning: August Ending: August 1	5,2021 5,2021
South Dakota Sales Tax Number: 1033-4358-ST	
Physical Street Address of Vending Location: 21 Deadwo	ood St.
Deadwood, S	SD 57732
	rans 14-7482
Complete Description of Goods and/or Services: the rapeutic	e charl massage
by SD lieensed Massage therapist	4ic M11595
	Lic # MT11595
I agree that any falsification, misstatements or omissions, included goods to be sold, shall result in immediate revocation of this license within the City Limits of Deadwood. It is further undestate and city sales tax is made a provision of this license. Applicant's signature:	cense and forfeiture of the right to
Fee: \$ Paid On Recei	pt Number
PLANNING AND ZONING ADMINISTRATOR:	
Approved/P&Z Administrator: Yes No Signature:	Date:
PLANNING AND ZONING COMMISSION	i e
Approved/P&Z Commission: Yes No	Date:

Reason for Denial (if necessary):