



**SPECIAL EVENT - VENDOR LISTING**  
NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER  
SFN 21911 (9-2008)



Name of Event	Event Start Date	Event End Date	
Location of Event	Organizer FEIN	Organizer Telephone Number	
Name of Organizer			
Organizer Address	City	State	ZIP Code

Please type or print legibly the information for all vendors.

ND Sales Tax Permit No.	Legal Name	DBA Name	Mailing Address	City	State	ZIP Code	Telephone Number



## Special Event Vendor Listing Instructions

### General instructions for the Special Event Form

Event organizers must request that vendors provide the information necessary to complete the Special Event Vendor List Reporting Form. Organizers should include all requested information, including ND Sales Tax Permit Numbers, into the event registration form.

#### Required fields on the Special Event Vendor List Reporting Form are as follows:

**Name of Event:** Enter official name of the event. (Example: Bismarck Vendor Extravaganza)

**Event Start Date:** Enter first day of event. (Example: 01/01/2017)

**Event End Date:** Enter last day of event. (Example: 01/01/17)

**Location of Event:** Enter city and/or site of event. (Example: Bismarck Event Center)

**Name of Organizer:** Enter full name of person(s) or organization organizing the event or vendors

**Organizer Address:** Enter full mailing address of organizer.

**Organizer Phone:** Enter Organizer's phone number. (Just type numbers, no dashes or parenthesis)

**ND Tax Permit No.:** It is the organizer's responsibility to request ND Sales Tax Permit Numbers from vendors. Not all attendees may be required to have a permit. Vendors should not be turned away if they do not have a permit. Most distributorship companies and home party companies usually pay the Sales Tax and the consultant may not know the permit number. If the vendor does not have a ND Sales Tax Permit Number or does not know the permit number, please leave it blank. **If a vendor does not have a North Dakota Sales Tax Permit, the vendor can call the Registration Section at 701.328.1241 to find out if they are required to have a permit.**

**Legal Name:** Enter the vendor's legal name. If the business is a sole proprietorship, it may be an individual's name. If it is a corporation, partnership, LLC, etc., will be a business name. In cases where the distributorship company pays the sales tax, enter the company name in the Legal Name column and the name of the consultant's name in the DBA Name column.

**DBA Name:** Enter the name the vendor is doing business as.

**Mailing Address:** Enter the complete mailing address of the vendor (do not use punctuation, abbreviate Street (St), Avenue (Ave), Drive (Dr) etc.).

**City, State and Zip:** Enter City, State, and Zip Code of vendors in the respective columns.

**Phone Number:** Enter the phone number to contact the vendor. Be sure to include area code (only use numbers, do not use dashes or parenthesis).

Go to [www.nd.gov/tax/specialevents](http://www.nd.gov/tax/specialevents) for more information. If you have any questions about the form or your organizer responsibilities, please contact the Office of State Tax Commissioner.