

SOUTHERN IOWA FAIR

615 N I STREET OSKALOOSA, IA 52577

641-673-7004

sifair@mahaska.org

COMMERCIAL EXHIBITOR APPLICATION

PLEASE PRINT CLEARLY

CONCESSION NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

MAIN PHONE #: _____ CELL: _____

E-MAIL: _____

GOODS OFFERED: Use attached sheet for listing of products sold or services offered (must accompany application).

FEDERAL ID #: _____ IOWA SALES TAX #: _____

SOCIAL SECURITY # (see note below): _____

SPACE SIZE REQUIRED: _____ INSIDE or OUTSIDE: _____ WATER NEEDED: _____

ELECTRICAL REQUIREMENT (volts, amps & other needs): _____

SIGNATURE: _____ DATE: _____

Submitting this application does not guarantee space is available. This application will be submitted to the Fair's Concession Committee for review. Applicants will be notified of status of application in a timely manner. Vendor Fee is based on space requirement, utility needs and products sold. All concessions and exhibitors engaging in business at the Fair must pay Iowa Sales Tax on all sales. Fair requires Federal ID number and Iowa Sales Tax number. Social Security number is required if concession does not have a Federal ID number and Iowa Sales Tax Permit number.

