

**SPECIAL EVENT AFFIDAVIT**

This event qualifies as a special event according to SC Code Section 12-36-510 (c).

I am not required to have a South Carolina Retail License because:

- I have not conducted retail sales in South Carolina in the previous 12 months **and**
- I will not conduct retail sales in South Carolina in the next 12 months

If either statement is not true, you must apply for a South Carolina Retail License. Apply online at dor.sc.gov/register.

If both statements are true, complete the following information for our records. You are not registering for a Retail License.

1. Owner, partnership, or corporate charter name (legal name)		2. FEIN _____ SSN _____	
3. Mailing address (for all correspondence) _____ In Care Of _____ Street _____ City State ZIP		4. Type of ownership <input type="checkbox"/> Sole Proprietor (one owner) <input type="checkbox"/> Partnership (two or more owners, other than LLP) <input type="checkbox"/> LLC/LLP filing as: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Single Member <input type="checkbox"/> Corporation State and date incorporated _____ <input type="checkbox"/> Foreign Corporation State and date incorporated _____ <input type="checkbox"/> Other (explain) _____	
5. Business phone number	6. Daytime phone number		
7. Email	8. Fax number		
9. Physical location of business (no PO Box) _____ Street _____ City County State ZIP		10. Is physical location within municipal limits? <input type="checkbox"/> Yes <input type="checkbox"/> No Which municipality? _____ Are you an SC resident? <input type="checkbox"/> Yes <input type="checkbox"/> No How long have you lived in SC? ____ YR ____ MO	

I agree to collect and pay the applicable Sales Tax for the county I am selling in on the provided Special Event Return.

I certify that the information on this affidavit is true and correct to the best of my knowledge.

Signature of owner, at least one partner, or corporate officer

Title

Date