

**SWAP MEETS, FLEA MARKETS, OR  
SPECIAL EVENTS CERTIFICATION**

IF you do not have a seller's permit and are not an exempt or occasional seller you MAY NOT sell at this event. A temporary seller's permit can be obtained at any local Board of Equalization office, at no cost to you. The business address on your temporary permit should be the address of the temporary selling location. The mailing address is your permanent place of business or residence. Board offices are listed in the phone directory white pages under STATE GOVERNMENT or in the Government Section.

Persons who exclusively sell exempt property such as fresh produce or cold food products for consumption off the premises are not required to have a seller's permit. Occasional sellers are persons who will not be making a series of sales sufficient in number, scope and character to constitute an activity requiring the holding of a seller's permit. Occasional sellers typically include persons who have cleared out their garages of their own used items, and sell only those items.

**Verifications of a seller's status is required by law. Please complete all four sections of this form. Please print.**

**1. EVENT INFORMATION**

EVENT NAME AND PLACE <b>Asian American Expo' 2010 / Pomona Fairplex</b>		1101 W. McKinley Ave. Pomona, CA 91768	
EVENT DATE <b>January 16th &amp; 17th, 2010</b>	BOOTH NUMBER	BUILDING #	CONTRACT NUMBER

**2. VENDOR/EXHIBITOR INFORMATION**

COMPANY/OWNER'S NAME \_\_\_\_\_

MAILING ADDRESS (Street Number or P.O. Box) \_\_\_\_\_

(City, State and ZIP Code) \_\_\_\_\_

TELEPHONE NUMBER (Include Area Code) (       ) \_\_\_\_\_

DRIVER'S LICENSE NUMBER AND STATE \_\_\_\_\_

GENERAL DESCRIPTION OF ITEMS TO BE SOLD/DISPLAYED \_\_\_\_\_

**3. STATUS—** Check appropriate boxes, and provide requested information

- I hold a valid Seller's Permit. My number is: **S**
- No sales are being made or solicited at this event.
- The items to be sold are exempt from sales tax for the following reason:
  - Exempt products
  - Sales are exempt occasional sales

**4. CERTIFICATION—** Partners/additional sellers, complete a separate copy of this form

*The above statements are certified to be correct to the best knowledge and belief of the undersigned.*

PRINT NAME	DATE
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SIGNATURE \_\_\_\_\_