



**Mardi Gras Parade
CITY OF CARENCRO
Cart Vendor Requirements**

The following are the requirements to obtain a Special Event Permit for cart vendors:

1. Fee of **\$150.00** for Special Event-Mardi Gras Cart Vendor permit for up to three carts; \$50 per cart after three.

2. **Must register with the State Sales Tax office and the Lafayette Parish Sales Tax office** for a Mardi Gras parade vendor permit. (Lafayette Sales Tax office 337-232-3912; State Office 337-262-5455)

** Effective 01/01/2020 (There shall be a \$200.00 deposit on each permit to guarantee payment of sales tax at the end of the Mardi Gras season. This deposit will be forfeited 30 days after Mardi Gras, if the taxpayer has not filed the sales tax return.)*

3. **Complete & sign application** for permit from the City of Carencro.

- **Permits will not be issued for use in excess of 300' from the centerline of the parade route.** This is in compliance with Ordinance 2010-002 which states "...within three hundred (300) feet of any parade route..."
- Applicant shall submit a written statement containing the full name, Social Security Number, and if applicable the nature of any felony convictions, under the laws of the United States, this state, or another state or country, against the applicant, any assistants, associates or employees who shall be employed by such person, prior to filing said application. Disqualification determinations shall be made by the Carencro Police Chief or his/her designee.

Please allow seven to ten business days for processing of application. If you have any questions, please contact Accounting at 337-896-8481, fax to 337-896-0890 or email to Lmeche@carencro.org or Glenda@carencro.org

Mardi Gras Parade Information:

(Roads close 1 hour prior to parade time)



Mardi Gras Parade Special Event Permit
City of Carencro
Stationary Stand

1. **A \$100 fee with completed and signed application for a Special Event Permit.**
 - **Permits will not be issued in excess of 300' from the centerline of the parade route.** This is in compliance with Ordinance 2010-002 which states "...within three hundred (300) feet of any parade route..."
 - Applicant shall submit a written statement containing the full name, Social Security Number, and if applicable the nature of any felony convictions, under the laws of the United States, this state, or another state or country, against the applicant, any assistants, associates or employees who shall be employed by such person, prior to filing said application. Disqualification determinations shall be made by the Carencro Police Chief or his/her designee.

2. **If applicable, a letter or signed lease/rental agreement from property owner** of the physical address of where stand will be located. (State in letter what the stand will be selling, the date, times, and physical location of property with property owners contact information.)

3. **Some sections of the application may not be applicable to your event.** If there is no organization name, please use the person who will be responsible at the event and the taxpayer/trade name with their mailing address, phone number, etc.

4. **Must register with the State Sales Tax office and the Lafayette Parish Sales Tax office** for a Mardi Gras parade vendor permit. (Lafayette Sales Tax office 337-232-3912; State Office 337-262-5455)
 - * **Effective 01/01/2020 (There shall be a \$200.00 deposit on each permit to guarantee payment of sales tax at the end of the Mardi Gras season. This deposit will be forfeited 30 days after Mardi Gras, if the taxpayer has not filed the sales tax return.)**

5. **Special Event permits with an alcohol permit for sale of alcoholic beverages of "low content alcohol" only can be issued;** however, you must also apply to the state for a state alcohol permit. (Alcohol Control Board: Baton Rouge 225-925-4041; Local contact-Allotes DeJean, email allotes.dejean@la.gov or 337-296-5448) **No special event permits will be issued from the City of Carencro for sale of high content alcoholic drinks; and cannot sell alcohol in bottles or glass containers.**

Please allow seven to ten business days for processing of application. If you have any questions, please contact Accounting at 337-896-8481, fax to 337-896-0890, or email to Lmeche@carencro.org or Glenda@carencro.org

Mardi Gras Parade Information: (Roads close 1 hour prior to parade time)

LAFAYETTE PARISH SCHOOL SYSTEM - SALES TAX DIVISION
207 TOWN CENTER PARKWAY
SUITE 101
LAFAYETTE, LA 70506
337-521-7365

Event Sales Tax Return

CARENCRO MARDI GRAS 2024
ACCOUNT # 61355

Owner Name _____ Phone # _____
Business Name _____ SS#/FEIN# _____
Email _____
Address _____

You are required to collect and remit 5% local sales tax (City of Carencro) on your retail sales.
Please complete the blanks below.

***If you are filing the event Sales under your Lafayette Parish Sales Tax Business Account,
please supply that account # _____ file in Column F(6) 5% (City of Carencro
School Board)**

Total Sale: _____ **5% Tax Due:** _____

Authorized Signature: _____ **Date** _____

If you have any questions please contact me.
Crystal Savage 337-521-7363 (cgsavage@lpssonline.com)

All payments are due on or before the 20th of the following month, to avoid penalty and
interest.

Mail check or money orders only - payable to:
Lafayette Parish School System
Sales Tax Division
Attn: Revenue Collector
P.O. Box 3883
Lafayette, LA 70502

**Louisiana Revised Statue 47:301 provides some information regarding the taxability of
transactions being conducted at your participating event. If you have any questions please
contact Corrine Iden (cmiden@lpssonline.com) at the Lafayette Parish Sales Tax Office**

APPLICATION FOR AND/OR REQUEST FOR

2. Fee _____

(Check one or more squares)

- A. Beer Only
 Liquor Only
 Liquor & Beer
 No Alcohol
 Food Service
 Amusements _____
- B. New Business
 Renewal _____
 Previous Year # _____
 Special Event
 Special Event with Beer Only
 Peddler's/Itinerant Vendor

4. Date of Application

Month Day Year

Total Number _____

Federal Employer ID Number None
 6. LA Sales Tax Number None
 7. Local Sales Tax Number None

A. Taxpayer Name _____ B. Area Code-Phone Number _____

C. Trade Name _____

D. Mail Address _____ E. City, State, Zip Code _____

F. Location-Street, City, State, Zip Code _____ G. Parish Location _____

Type of Organization A. Individual B. Partnership C. Corporation D. Governmental E. Non-Profit F. Other

If corporation or partnership Name Title SSN
 Resident Address Phone
 Name Title SSN
 Resident Address Phone
 Name Title SSN
 Resident Address Phone

If Sole Owner (Individual) Name SSN
 Resident Address Phone

Emergency Contact Information: Name: _____ Telephone # _____
 13. Fax Number: Area Code _____ Number _____
 14. E-mail Address _____ Web Site Address _____

If Corporation, State of Incorporation _____
 16. Reason for Applying A. Started New Business C. Other (Specify) _____
 B. Purchased Going Business - Name of previous Owner _____

7. Date Business Started/ Acquired at THIS LOCATION Month Day Year
 18. Have you registered with the Secretary of State for Louisiana as a Foreign Corporation Yes No
 19. Excluding This One How Many Other Business Locations Do You Have in This Parish or Municipality? _____

2. Nature of Business Description of Sales or Activity: _____

Signature of Applicant Title
 Signature of Preparer If different from above

I affirm that the information given on this application and attached schedules is true and correct.