



# Historic Route 66 Association of Arizona

PO Box 66, Kingman, AZ 86402  
www.historic66az.com 928.753.5001

## Vendor Request Application 36<sup>th</sup> Annual Route 66 Fun Run May 2 - 4, 2025

The Fun Run car show will be held in downtown Kingman on Saturday, May 3<sup>rd</sup>, 2025. We expect between 3,500 and 4,750 event participants and spectators. The car show is from 9 am to 4 pm. Please email application to Nikki Terlesky and reach out with any questions, [nikki@historic66az.com](mailto:nikki@historic66az.com). Your application is not approved until you hear from us. We do not accept every vendor that sends a request.

Business Name \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_  
Arizona Tax Resale Number \_\_\_\_\_  
Insurance Company Name \_\_\_\_\_ Policy # \_\_\_\_\_  
Vendor type: Food \_\_\_\_\_ Arts/Crafts \_\_\_\_\_ Other \_\_\_\_\_

Describe items to be sold (food vendors may also include menu and prices in a separate document):  
\_\_\_\_\_

Type of Setup: Food Truck \_\_\_\_\_ Trailer \_\_\_\_\_ Canopy \_\_\_\_\_ Other \_\_\_\_\_  
Allotted space: 10 feet x 10 feet. If oversized, you must purchase 2 spaces.  
Footprint of your setup: \_\_\_\_\_  
**\$75.00 fee per space.**

Please complete the attached City of Kingman license and return it with this application to the Association.

### Important Information

- \*All food vendors are required to have a Mohave County Department of Health permit.
- \*Power and water, if required, must be supplied by vendor.
- \*Trash receptacles and liners must be supplied by vendor.
- \*Saturday setup time starts at 7 am, May 3, 2025, at Locomotive Park and takedown starts at 4 pm. You may not close or leave before 4 pm.
- \*Vendors **may not** sell Route 66 items that conflict with Association Gift Shop merchandise.
- \*The Historic Route 66 Association of Arizona cannot be held responsible for and will not make refunds for adverse weather conditions or personal emergencies.

Signature \_\_\_\_\_ Date \_\_\_\_\_

CITY OF KINGMAN  
310 N. 4th Street, Kingman, AZ  
(928) 753-8113



Fee: \$ 11.00  
[waived with Current Business License]

City of Kingman Business License #:  
\_\_\_\_\_

## SPECIAL EVENT VENDOR PERMIT

**PLEASE BE SURE ALL AREAS ARE LEGIBLY FILLED OUT BEFORE SUBMITTING**

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Date/s of Event: \_\_\_\_\_

Business Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Arizona Sales Tax #: \_\_\_\_\_

Describe Your Business Type/Products: \_\_\_\_\_

Applicants Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Applicants Address: \_\_\_\_\_ Email: \_\_\_\_\_

I HEREBY CERTIFY THAT THE STATEMENT MADE ON THIS APPLICATION ARE COMPLETE AND ACCURATE.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(BOTTOM PORTION OF THIS FORM IS TO BE GIVEN TO VENDOR TO DISPLAY DURING EVENT)

CITY OF KINGMAN  
310 N. 4<sup>th</sup> Street Kingman, AZ 86401  
928-753-8113



## SPECIAL EVENT VENDOR PERMIT

**MUST BE POSTED CONSPICUOUSLY**

EVENT: \_\_\_\_\_

EVENT DATE(S): \_\_\_\_\_

ISSUED TO: \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_

DATE EXPIRES: \_\_\_\_\_

EVENT ORGANIZER: \_\_\_\_\_ DATE: \_\_\_\_\_