



GARAGE LICENSE APPLICATION

DATE _____

NAME OF APPLICANT _____ PHONE NO. _____

ADDRESS OF APPLICANT _____

NAME OF PERSON, FIRM, GROUP, CORPORATION, ASSOCIATION, OR ORGANIZATION
CONDUCTING SALE _____

LOCATION OF SALE _____

NAME OF OWNER OR PROPERTY _____

ADDRESS OF OWNER OF PROPERTY _____

TELEPHONE NUMBER OF OWNER OF PROPERTY _____

DATES OF SALE _____ AND _____ (two consecutive days only) **permitted hours** - 9 a.m. and 6 p.m. daily except that on Sundays and holidays that same shall only be conducted between 12 noon and 6 p.m.

Has the applicant had any relationship or connection with any other person, firm, group, organization, association or corporation conducting any similar sales within the past twelve months:
yes _____ no _____

IF SO, dates of such sale(s) _____
Goods to be offered for sale have not been acquired for the purpose of their being offered for sale at this garage sale.

State of New York)
County of Nassau) ss

_____, being duly sworn, deposes and says that he/she is the applicant above named and that the statements contained in the foregoing application for a garage sale permit are true to the best of his/her knowledge and belief.

Signature of Applicant

TO BE COMPLETED BY OWNER OF PROPERTY IF OTHER THAN APPLICANT

_____, being duly sworn, deposes and says that he/she is the owner of the above named property to be used for said garage sale and has no objection to same.

Signature of Owner

SWORN TO BEFORE ME

THIS _____ DAY OF _____, 20__.

(NOTARY PUBLIC)

FEE PAID \$ _____

RECEIPT NO. _____

APPROVED _____ VILLAGE CLERK DATE _____