

GARAGE SALE APPLICATION

Fee: \$5.00 per permit

Applicants Name: _____ Date: _____

Address of Sale: _____ Phone #: _____

Email Address: _____

Choose One:

TWO (2) WEEKENDS (*in a row*) First Weekend Date: _____

Second Weekend Date: _____

~ OR ~

3-DAY SALE (*in a row*) 1st Day _____ 2nd Day _____ 3rd Day _____

Date(s) of Prior Sale(s) held this year _____

IN THE EVENT THAT IT RAINS ON THE 1ST DAY OF YOUR SALE A REPLACEMENT DATE WILL BE GIVEN BY OUR OFFICE.

Copy of Township Code Chapter 191 received _____ (*please initial*)

Signature

OFFICIAL USE ONLY

Permit # _____ Date _____ # of sales held this year _____
(Max 3 permits per year)

Check # _____ /Cash _____ Initials _____ Scanned _____