

## ZONING PERMIT APPLICATION (GARAGE SALE)

**APPLICANT INFORMATION.** Name of person, firm, group, corporation, association or organization conducting the sale.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Date sale is to be conducted: \_\_\_\_\_

Hours sale is to be conducted: \_\_\_\_\_

**PROPERTY INFORMATION.**

Property address where sale is to be conducted: \_\_\_\_\_

Tax Map Designation: Block \_\_\_\_\_ Lot \_\_\_\_\_.

Name of property owner: \_\_\_\_\_

Have any sales been conducted on this property in the last twelve (12) months? \_\_\_\_\_

If yes, date of previous sales: \_\_\_\_\_

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Permit Approved

Permit Denied

\_\_\_\_\_  
Zoning Officer

\_\_\_\_\_  
Date

Fee collected \$ 25.00     cash     credit card     check # \_\_\_\_\_

Received by \_\_\_\_\_

Date \_\_\_\_\_