

TOWN of WAITSFIELD
Application for Garage Sale Permit

Date of Application: _____ Fee Paid: _____

Name, address and phone number of applicant: _____

If sale is for charitable purposes, name of and contact person for charitable organization:

Exact location of sale: _____

Name and phone number of property owner (if owner is not the applicant, written consent of owner must be submitted with this application): _____

Date(s) of sale: _____

Has any sale been conducted on the same premises during this calendar year? Yes No
If yes, on what dates? _____

What arrangements, if any, have been made for parking? _____

Signature of Applicant _____ Date _____

===== **DO NOT WRITE BELOW THIS LINE** =====

Application for Garage Sale Permit is: Approved Denied

Special Conditions: _____

For Waitsfield Selectboard: _____

Signature and Title _____ Date _____