

**CITY OF KEMPNER
GARAGE SALE APPLICATION**

DATE OF APPLICATION: ___/___/___ DATE RECEIVED BY DEPT.: ___/___/___ Initials: ___

PERSON MAKING APPLICATION: _____

ADDRESS OF GARAGE SALE SITE: _____

PHONE NUMBER: _____ ALTERNATE PHONE NUMBER: _____

DATE(S) OF SALE: ___/___/___ TO: ___/___/___

TIME(S) OF SALE: ___/___/___ TO: ___/___/___

(Time of sale will not begin before 8:00 a.m. and not extend beyond 8:00 p.m.)

LISTING OF PROPOSED ITEMS TO BE SOLD:

NOTICE: PLEASE READ THIS FOLLOWING LIABILITY STATEMENT:

The Applicant hereby agrees to accept full responsibility for any and all liabilities that result from this sale. It is further agreed that the conditions listed within the City of Kempner Garage Sale Ordinance will be met and adhered to by the applicant. A \$5.00 fee will be charged to obtain permit.

I have received, read, and fully understand the stipulations of the City of Kempner's Garage Sale Ordinance, #2012-12-11-001.

PRINTED NAME

SIGNATURE

___/___/___
DATE

For Office Use Only:

Name of person receiving application: _____ Date: ___/___/___

Date to begin garage sale: ___/___/___ to ___/___/___

Permit Number: _____