

CITY OF LIBERTY YARD SALE PERMIT

1. _____
FULL NAME OF APPLICANT

2. _____
**FULL NAME OF PERSON OR PERSON(S) WHO WILL BE
CONDUCTING THE YARD SALE**

3. _____
LOCATION OF YARD SALE

4. _____
IS THE SALE BEING CONDUCTED ON YOUR PROPERTY

5. _____
APPLICANTS PHONE NUMBER

6. _____
DATE(S) UPON WHICH YARD SALE IS TO BE HELD

7. _____
HOW MANY YARD SALES HAVE YOU HAD THIS QUARTER?

NOTE: NO SIGNS ON POLES!!!!!!!!!!!!!!

**SIGNS ALLOWED: ONE (1) AT EACH END OF YOUR
ROAD AND ONE (1) IN YOUR YARD.**

ONLY ONE YARD SALE PER QUARTER.

NO YARD SALES ON SUNDAY!!!!!!!!!!!!!!

**YARD SALES MUST NOT LAST FOR MORE THAN
TWO CONSECUTIVE DAYS.**

**YARD SALES ARE NOT PERMITTED ON PUBLIC PROPERTY WITHOUT
PRIOR APPROVAL!!!**

I AFFIRM THAT THE PROPERTY TO BE SOLD IS OWNED BY THE
APPLICANT AS HIS/HER OWN PROPERTY AND WAS NEITHER
ACQUIRED OR CONSIGNED FOR THE PURPOSE OF RESALE.

I AFFIRM THAT I HAVE READ AND UNDERSTAND THE ABOVE
STATED LAWS REGARDING YARD SALES AND THE ATTACHED YARD SALE
ORDINANCE NO. 03-0302.

SIGNATURE OF APPLICANT

OFFICE USE ONLY

Date: _____

Amount: \$ _____

Received by: _____