

CITY OF GALLIPOLIS
GARAGE SALE APPLICATION

Receipt #: _____

Name of Applicant _____

Address: _____ Phone: _____

Address of Sale _____

Date(s) of Sale _____

The date(s) of any other garage sales in which the applicant participated within the twelve month period prior to the proposed date of sale.

Affirmation statement the property to be sold was owned on the date of application by the applicant or by members of his or her residence and was neither acquired nor consigned for the purpose of resale.

Signed: _____