

CITY OF EAST ORANGE DIVISION OF LICENSING

MUST APPLY ONE WEEK IN ADVANCE

ANY FALSE STATEMENTS WILL BE CAUSE FOR REVOCATION OF LICENSE

YARD /GARAGE SALE PERMIT

Date _____ License # _____ FEE: \$10.00

Address for which license is desired _____

Full name of applicant _____

Home Address _____

Home Phone Number _____

Two character references: NAME & ADDRESS/OR PHONE NUMBER

1. _____

2. _____

Types of Products _____

LICENSE VALID FOR TWO CONSECUTIVE DAYS WITH ONE RAIN DATE

Dates Requested _____ Rain Date _____

AFFIDAVIT

State of New Jersey
County of Essex
City of East Orange

_____, Being duly sworn deposes and says
that he/she is the individual making the foregoing application for a Garage/Yard
Sale license and that the answers to the questions contained therein are true.

Subscribed and sworn before me this _____ day of _____ 20 _____

Signature of Applicant

Signature of Notary