YARD SALE PERMIT APPLICATION

City of Headland 25 Grove Street Headland, AL 36345
Phone: 334-785-5605 Email: license@headlandalabama.org

City of HEADLAND

Date of Application

Permit No.:

PLEASE PRINT OR TYPE LEGIBLY AND FILL IN ALL THAT APPLY.

Property Owner Name

Mailing Address

Phone Number

Email Address

Personal ☐ Church/Non-Profit ☐ Organization/Group ☐ Fund Raiser ☐

Name of Group

Have you had a Yard Sale Previously This Calendar Year? Yes ☐ No ☐

If yes; How Many?

*No more than 3 Yard Sales are allowed in a calendar year by one person or at the same property location

YARD SALE INFORMATION

Yard Sale Address

1st Choice Dates to *max 3 consecutive days

(If for any reason you will not be having a sale on this date, please call the office and let them know that the date has been changed. Once doing so, the 1st choice will be voided)

Start Time: End Time:

2nd Choice of Dates to *max 3 consecutive days

(This date will only be used if weather or other circumstances did not permit the sale to take place for any length of time on the 1st choice date. This choice does not give permission to have a sale on both dates written

Start Time: End Time:

**Please reference the Yard Sale Ordinance
Regarding regulations on advertising for your Yard Sale.

I hereby certify that I have read this application and that all information contained herein is true. If any portion of this information, either intentionally, is false or is a misrepresenation of the material facts, the permit process granted will be void. I further certify that if I am not the owner of the property, that I have proper authorization from the owner to act as a representative on his/her behalf and that I may be required to provide written documentation of such authorization to the CIty of Headland. I also acknowledge that I have read and understood the Ordinance pertaining to Yard Sales

Date Signature