

MAYOR JAMES P. DODD
(973) 366-2200 Ext. 1144
E-mail: jdodd@dover.nj.us

TARA M. PETTONI, RMC
Municipal Clerk
973-366-2200 Ext. 1128
E-mail: tpettoni@dover.nj.us

Website: dover.nj.us
FAX: (973) 328-6524

TOWN OF DOVER

Municipal Clerk's Office



**37 NORTH SUSSEX STREET
DOVER, N.J. 07801**

Council Members:
CHRISTOPHER ALMADA
GEOVANI ESTACIO
DANIELLA MENDEZ
JUDY RUGG
ARTURO SANTANA
MARCOS TAPIA
VERONICA VELEZ
SANDRA WITTNER

GARAGE SALE APPLICATION

Application Date: _____

Applicant Name: _____

Address: _____

Phone Number: _____ **Cell:** _____

Location (Address) of Garage Sale: _____

*If you are not the owner of the property on which the sale is to be conducted, a letter of consent from the owner is needed.

Have you been issued any other vendor's license by any Local, State or Federal Agency? **YES** _____ **NO** _____

Dates of Sale: _____

Rain Dates: _____
Up to three (3) consecutive days

Dates of Past Sales: _____

VALID ON THESE DATES ONLY

PERMIT MUST BE DISPLAYED IN A VISIBLE LOCATION AT TIME OF SALE

\$5.00 Fee Paid Check #: _____ Money Order: _____ Cash: _____ Receipt #: _____

Applicant Signature: _____ Date: _____

Approved: _____ Date: _____

Applications shall be submitted at least one week prior to the requested date.