

CITY OF HAYSVILLE

AUCTION PERMIT APPLICATION

Applicant (Please Print) _____

Address of Applicant _____ Phone _____

Address of Auction _____

Date(s) of Auction _____ Time(s) _____

Items To Be Auctioned _____

Auctioneer _____

Liability Insurance Carrier _____

Insurance Contact _____ Phone _____

Signature of Applicant _____ Date _____

For Office Use Only

\$50 Application Fee Paid _____ Cash _____ Check _____ Charge _____

Received By _____ Receipt No. _____