



**City of Imperial
Community Development
Department**

420 South Imperial Avenue
Imperial, CA 92251

Phone (760)355-1152 | Fax (760)355-4718

Garage Sale Permit

Name: _____

Address/Location of Sale: _____

Phone: _____

Date(s) of Sale: _____

Fax: _____

I have read and agree to comply with the regulations regarding use of this permit. I declare that I have examined the information provided on this application, and to the best of my knowledge, represents a true, correct and complete statement of facts. I HEREBY CERTIFY THAT NO MERCHANDISE OF ANY TYPE WHATSOEVER HAS BEEN PURCHASED OR CONSIGNED FOR RESALE AT THIS PROPOSED EVENT.

Signature: _____

Date: _____

OFFICE USE ONLY BELOW THIS LINE

1st Sale: _____ 2nd Sale: _____ 3rd Sale: _____ 4th Sale: _____

Permit Issued By: _____ Date: _____