

Municipal Building 135 Haddon Avenue Haddon Township, NJ 08108 Tele: (856) 854-1176 Fax: (856) 858-8335 Web: <u>www.haddontwp.com</u>

where community thrives GARAGE/YARD SALE APPLICATION

Name: Address:	
Owner of Property (if different from	n above):
Address:	
Phone/Cell #:	
Letter of Consent from Owner (if n	ot owned by person conducting sale)?YesNo
Location where sale is to be conduc	cted (if different from above address):
Date of Sale:	
Please list the dates and nature of provide the dates and natu	revious sales conducted by applicant in Haddon
Signature:	Date:
of this Ordinance regarding fees, fi	e of the Township of Haddon for further clarification nes, deadlines, responsibilities, and violations.
the sale to be conducted pursuant	be made not less than two weeks prior to the date of to the license requested. The sale referenced above am and is to be terminated by sundown.
FOR OFFICE USE ONLY:	
Date Received: Payment information:	By: