



City Clerk's Office

197 North Main Street, Ellijay, GA 30540

Phone: (706) 635-4711 X3 Fax: (706) 635-4712 Email: cityclerk@ellijay.com

City of Ellijay Auction Permit Application (Pursuant to Municipal Code Section 22-33)

Application Date: _____

Auctioneer Name: _____

First

Middle Initial

Last

Company Name: _____

Address: _____

Telephone: (____) _____ Location of Auction: _____

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

Please initial the statements listed below:

_____ I have attached a certified copy of all state auctioneer's licenses of the person(s) who will be conducting the auction.

_____ The attached inventory list is a full and true inventory of all the articles to be sold at the auction sale and all information contained in the application is true.

_____ I certify that there are no unpaid taxes, assessments or other claims owed to the City nor any unpaid forfeiture resulting from a violation of any City Ordinance.

_____ A certificate of Liability Insurance is attached showing the City of Ellijay as an additional insures in the amount of \$1,000,000.00.

The application shall accompany a receipt or other reasonable evidence showing that any taxes due on such merchandise, if taxed or taxable, have been paid.

Signature: _____ Date: _____