



TOWN OF EDGARTOWN  
OFFICE OF THE SELECTMEN  
70 Main Street, P.O. Box 5158  
Edgartown, MA 02539  
508-627-6180

**APPLICATION FOR A YARD SALE PERMIT**

\*Yard Sale Permit Applications must be approved by the Board of Selectmen and submitted to the office before noon the Thursday before a scheduled Monday meeting.\*

Date \_\_\_\_\_

1. NAME \_\_\_\_\_
2. STREET ADDRESS \_\_\_\_\_
3. DO YOU RESIDE AT THE ABOVE PREMISES? \_\_\_\_\_
4. DATE OF SALE \_\_\_\_\_
5. RAIN DATE \_\_\_\_\_
6. HOURS OF SALE \_\_\_\_\_
7. LOCATIONS OF PARKING FOR VEHICLES \_\_\_\_\_

\_\_\_\_\_  
*No parking on Public Ways except where designated - See Regulations*

\_\_\_\_\_ I have been given a copy of the Yard Sale Regulations

Fee: \$10.00 non-refundable per day  
which must accompany application \_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant  
(Individual residing on premises)*

**PLEASE DO NOT WRITE BELOW THIS LINE**

Date Received \_\_\_\_\_  
Fee Paid \_\_\_\_\_  
Date Approved \_\_\_\_\_  
Permit Number \_\_\_\_\_