



# TOWN OF PLYMOUTH

26 Court Street  
Plymouth, Massachusetts 02360  
(508) 747-1620

## APPLICATION FOR SPECIAL AUCTIONEER PERMIT

**Fee: \$20.00 per day**

The undersigned hereby makes application for a Special Auctioneer Permit:

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

State License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Hours of Auction: From: \_\_\_\_\_ to: \_\_\_\_\_

Location of Auction: \_\_\_\_\_

Approximate Value of  
Goods \_\_\_\_\_

General Description of  
Goods to be  
Auctioned \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR STATE AUCTIONEER'S LICENSE  
TO THIS APPLICATION**