



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**