

# City of Moline Acres

2449 Chambers Rd.

St. Louis, MO 63136

Phone: (314) 868-2433 \* Fax: (314) 868-8224

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

Permit Amount: \$15.00

(Please check one)

Permit For: Garage Sale \_\_\_\_\_

Yard Sale \_\_\_\_\_

Date of Event: \_\_\_\_/\_\_\_\_/\_\_\_\_

Property Owner's Name: \_\_\_\_\_  
(Last) (First)

Address: \_\_\_\_\_  
(Street Name) (Zip Code)

Home Number: ( ) \_\_\_\_ - \_\_\_\_

There will only be two (2) free permits issued to each residence per year.  
For any additional permits issued there will be a \$15.00 fee required.

This request has been approved by the City of Moline Acres and all appropriate fees have been paid. This permit will be revoked if the applicant is found not to be in compliance with the City Ordinances.

\*I understand the terms and conditions that have been presented to me in the above box. By signing below, I am agreeing to comply with all of the city's ordinances.

\_\_\_\_\_  
Resident Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

For Office Use Only

\_\_\_\_\_  
Personnel Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

1<sup>st</sup> permit issued: \_\_\_\_/\_\_\_\_/\_\_\_\_ (fee waived)

2<sup>nd</sup> permit issued: \_\_\_\_/\_\_\_\_/\_\_\_\_ (fee waived)

Additional permit issued: \_\_\_\_/\_\_\_\_/\_\_\_\_

Fee: \$ \_\_\_\_\_

Additional permit issued: \_\_\_\_/\_\_\_\_/\_\_\_\_

Fee: \$ \_\_\_\_\_