

OCCASIONAL SALES PERMIT APPLICATION

FOR OFFICIAL USE ONLY

PLEASE PRINT

Name _____ Ward _____

Address _____ Zip Code _____

You must show proof of residency (i.e. a current bill, tax record, etc.)

Home Phone () _____ Cell Phone () _____

Work Phone () _____

Date(s) of sale (up to 3 consecutive days) _____ September 19, 2026

Number of sales, if any, at the above address within this calendar year
If you have held two Occasional Sales within this calendar year, you may have a third sale at the same property only if you are moving within six months of the date of the sale.
(See affidavit below)

According to ordinance 10-8-320, you may not advertise your sale by posting signs or any other material (flags, banners, etc.) on any city property (i.e. light poles, traffic signals, bus stops, etc.) including string banners between light poles. You are entitled to post signs on your own property only.

By signing this application, I affirm that the above information is correct, and that the items to be sold at the sale consist only of pre-used personal items and not new or stolen goods.

Signature

Date

Please indicate how you wish to receive your permit:

**Aldermanic and Sanitation office hours vary; call for schedule.*

NOTE: For multi-family sales, each participating household/occupant must submit an application.

NOTE: A determination on applications received with less than 48 hours notice cannot be guaranteed.

NOTE: If you are moving within six months of the date of the sale, you must either provide proof of your impending move (e.g., executed sales contract or lease on a new property; eviction notice) or complete the affidavit below. If completing this affidavit, you must have your signature notarized.

Affidavit for Third Sale

Permit Number _____

☐ Proof of residency on file

☐ Proof/affidavit of move on file

Date permit approved: _____

Date permit issued: _____

☐ Faxed to applicant

☐ Held for pick-up

☐ Faxed to Aldermanic office

Date permit denied: _____

Reason:

☐ No proof of residency

☐ Two sales in one year/no move

☐ No proof/affidavit of move

Other: _____

Permit Expiration Date: _____
(permit expires at sunset)

Authorized by: _____

**Complete fully, sign, enclose
proof of residency
(photocopies are
acceptable), and mail or fax
to your Alderman's office.**

**To obtain your ward
aldermanic office address or
fax number, call 311**

Application available online at:
www.chicago.gov/dss



City of Chicago
Mayor Brandon Johnson