



**Board of License Commissioners
Greenfield, Massachusetts**

*14 Court Square, Greenfield, MA 01301
phone: 413) 772-1580 fax: 413) 772-1519
email: LoriK@townofgreenfield.org*

Application for annual auction license

Date _____

Applicant information:

Applicant / licensee name _____

Applicant / licensee address _____

Applicant / licensee phone number _____

Applicant / licensee email _____

Social security number _____

– OR –

Business FID number _____

Auctioneer information:

Auctioneer name _____

Auctioneer address _____

Auctioneer phone number _____

Auctioneer email _____

Social security number _____

– OR –

Business FID number _____

Auctioneer date of birth _____

License number of auctioneer _____

Attach a copy of the Auctioneer's Massachusetts Auctioneer license and a copy of the surety bond for \$10,000.

Establishment information:

Address at which auction would be conducted _____

Property owner name _____

Property owner mailing address _____

Property owner phone number _____



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Establishment name _____

Establishment phone _____

On site manager / contact person _____

Operation of business:

Frequency of auctions _____

Hours between which auction would be conducted:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

What types of articles will be auctioned? _____

Estimated value of goods: _____