

**COUNTY OF MONTGOMERY**

**Application for Flea Market Permit  
Permit No. \_\_\_\_\_**

**Name and Address of Promoter/Operator:**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of Contact Person** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Location of Sale** \_\_\_\_\_

\_\_\_\_\_

**Dates and Time of Sale** \_\_\_\_\_

\_\_\_\_\_

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**Site Plan**

- **Is site plan attached** Yes \_\_\_\_ No \_\_\_\_
- **Does site plan depict the layout of all booths and other sales?** Yes \_\_\_\_ No \_\_\_\_
- **Area located out of doors or within a building?** Yes \_\_\_\_ No \_\_\_\_
- **Location of all entrances to the area on the facility?** Yes \_\_\_\_ No \_\_\_\_
- **Layout of Off-street parking spaces?** Yes \_\_\_\_ No \_\_\_\_
- **Location of overnight camping spaces?** Yes \_\_\_\_ No \_\_\_\_
- **Location of sanitary facilities?** Yes \_\_\_\_ No \_\_\_\_
- **Explain security provisions** \_\_\_\_\_

\_\_\_\_\_

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- Note:** (1) **Attach a copy of all necessary permits from the Department of Health including permits for overnight camping, if camping is proposed, and permits for food preparation at sale.**
- (2) **Attach a copy of the Virginia Department of Transportation approval of entrances from highway to the flea market area.**

Are you requesting exemption from the requirements of this Article as a civil and charitable organization? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, attach a copy of bylaws and give date of incorporation.

I certify that the above and attached information is correct to the best of my knowledge.

Print Name: \_\_\_\_\_

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

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

Check payable to Treasurer of Montgomery County in amount of \$200 must accompany this application.

**PENALTIES FOR VIOLATION**

ANY PERSON, PARTNERSHIP, CORPORATION OR VENDOR VIOLATING THE REGULATIONS SET FORTH HEREIN APPLICABLE TO FLEA MARKET TYPE ACTIVITIES SHALL BE FINED NOT MORE THAN ONE HUNDRED (\$100.00) DOLLARS A DAY FOR EACH OFFENSE AND EACH DAY SHALL CONSTITUTE A SEPARATE OFFENSE.

\_\_\_\_\_  
**For Official Use Only**

Application reviewed by County Attorney:

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

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

Application/Site reviewed by Code Enforcement Officer

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

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

Flea Market Permit:      Approved \_\_\_\_\_      Denied \_\_\_\_\_

Permit Period from \_\_\_\_\_ to \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_  
**County Administrator**