



CITY OF DEVILS LAKE GOING OUT OF BUSINESS PERMIT

Date: _____
Name of Business: _____
Business Address: _____
Starting Date of Sale: _____
Length of Sale: _____
Ending Date of Sale: _____

As a part of this application, I hereby agree to indemnify and hold harmless the City of Devils Lake, its agents and employees from and against all claims, damages, losses and expenses arising, either directly or indirectly, from the activity for which this permit is issued. It being further understood by me that the City of Devils Lake by approving said permit assumes no liability, responsibility or accountability for the activity or action which applicant proposes, the responsibility as hereinbefore stated, being solely the responsibility of me.

FEE: NONE

**MUST ACCOMPANY APPLICATION : A COPY OF ALL ORDERS FOR
MERCHANDISE MADE PRIOR, BUT NOT YET RECEIVED BY APPLICANT.**

Signature of Applicant: _____

Name of Applicant: _____

Address of Applicant: _____

Date: _____ Approved: _____ Denied: _____

City Administrator

Revised: 6/06