



# CENTRAL PERMIT OFFICE

CITY OF SYRACUSE, MAYOR BEN WALSH

## Auctioneer License Instructions

**Overview:** This license is for any person or entity acting as an auctioneer of personal property and engaging in public auctions within the city of Syracuse. For more information, [click here to read the Ordinance.](#)

### Application Contents:

- License Requirements
- Application Checklist
- Submittal Instructions
- Auctioneer License Application, pages 2 to 3

### License Requirements:

- The license must be renewed every year.
- A background check and City review must be conducted before issuing this license.

### Application Checklist:

- Completed Auctioneer License Application (pages 2 to 3). The application must be signed in the presence of a notary public.
- \$100 Application Fee. Check or Money Order payable to Commissioner of Finance.
- Copy of Applicant's Photo Identification: Driver's License, Passport or equivalent.
- \$5,000 Bond must be posted and approved.

### Submittal Instructions:

1. Application must be completed in its entirety. Incomplete applications will not be processed.
2. Application, fee, and additional documents must be submitted to:

**City of Syracuse, Central Permit Office**

One Park Place

300 South State St.

Syracuse, NY 13202

315-448-8474 | [Licensing@syr.gov](mailto:Licensing@syr.gov)



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## Auctioneer License Application

Business Name and Doing Business As (DBA): \_\_\_\_\_

Type of goods to be auctioned: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Is your Business one of the following (circle one)? Corporation / Partnership / Association / Firm

If yes, list all principal officers including their addresses, phone numbers, titles, and dates of birth:

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The undersigned \_\_\_\_\_ does hereby apply to the License Commissioner of the City of Syracuse, State of New York, for an Auctioneer License pursuant to the Revised General Ordinances of the City of Syracuse.

## Indemnification Statement

Upon issuance of this license, the applicant agrees to indemnify, defend, and hold harmless the City of Syracuse, its officers, agents, and employees from and against all damages, claims costs, or expense arising from the issuance of this license, provided that such damage, claim cost or expense is attributable to bodily injury, sickness, disease, or death or damage to property. This indemnity shall survive the expiration and/or termination of this license.

Section below to be completed in the presence of Notary Public:

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Duly sworn to before me on this \_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_.  
Applicant Name

SEAL/STAMP

\_\_\_\_\_  
Notary Public Print Name

\_\_\_\_\_  
Notary Public Signature