

Town of Centerville
102 East Swan Street
Centerville, Tennessee 37033
(931) 729-4246

Event Permit Application

APPLICANT'S NAME _____

APPLICANT'S ADDRESS _____

APPLICANT'S PHONE # _____ FAX # _____

E-MAIL _____

NAME OF ORGANIZATION RESPONSIBLE _____

PURPOSE OF THE EVENT

DATE OF EVENT _____ START TIME _____ END TIME _____

EVENT TRAVEL ROUTE (including starting point and termination point)

Please attach a map depicting the course of the Event

If private property is used for parade formation or disbanding, provide name, address, phone # of private property owner:

Will the Event occupy all or only a portion of the width of the streets or public land proposed to be used: (explain)

APPROXIMATE SIZE AND LENGTH OF EVENT:

APPROXIMATE # OF PERSONS _____ # OF VEHICLES _____

OF ANIMALS _____

CERTIFICATE OF INSURANCE - Please attach Certificate of Insurance to this Application.

NOTE: The Event Permit will not be issued prior to receipt of the Certificate of Insurance.

Signature of Applicant _____

Date _____

Signature of Police Department _____

Date _____

Signature of Recorder _____

Date _____