

**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 Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

Signature of Recorder \_\_\_\_\_ Date \_\_\_\_\_