APPLICATION FOR EVENT PERMIT

(Submit to City Manager at least 10 days prior to event date)

(Please Print Legibly)

Date of Application:				
Submitted To: City Mand	ager, 4701 Gary Ave, Fairfield, AL 3	35064 Ph: 205-7	88-2492	
From:				
(Organization requesting perm	it)		
Contact Person:				
Address:				
Phone:				
We hereby make app	plication to hold:			
Date of event:	During the hours of:	and and	(F 1)	_ (AM/PM)
TD1	etails related to event: (ex., ex	(Start)	(End)	Control of the contro
	fill in information below:			
Number of parade par	ticipants: Number	er of event atter	idees:	
Number of vehicles ex	xpected:			
unianananananananananananananananananana	FOR OFFICE U	SE ONLY		USIONENENENENENENENENENENENENENENENENENENE
APPROVAL FROM DEP	ARTMENT HEADS:			
PUBLIC WOR	PKS		POLICE C	HIEF
FIRE CHIEF	7			
DATE RECEIVED BY CI	TY MANAGER:			
APPROVED:				

(CITY MANAGER)