



TOWN OF GREENEVILLE Special Event Application

Name of Event _____

Name of Organizer _____

Address _____

Phone _____ E-mail _____

Event Date(s) _____ Event Hours *(Include time for setup and cleanup)* _____

Desired Right-Of-Way Closures _____

Maximum Number of Street Vendors _____ Admission Charges _____

Public Facilities Plans _____

Public Safety Measures _____

I agree to faithfully perform all obligations under the Town of Greeneville's Special Events Ordinance.

I indemnify and hold harmless the Town of Greeneville from any and all claims or losses arising out of the acts or omissions of myself, my employees, officers and agents.

I have read and agree to abide by all the rules and regulations of this event.

Signature _____ Date _____

Police Signature* _____ Public Works Signature* _____

Fire Chief Signature* _____

***Signatures are required before the application will be considered. Event organizers are responsible for obtaining these signatures.**