

**Connie W. Kittrell
City Judge/City Recorder
City of Gallatin
132 West Main Street, Room 112
Gallatin, TN 37066**

**Telephone: 615-451-5893
Fax: 615-451-5916**

Special Event Permit Application

Organization: _____

Address of Organization: _____

Name of Contact Person: _____

Telephone of Contact Person: _____

Name of Special Event: _____

Date Requesting Permit: _____

Location of Event: _____

Time Requesting Permit: _____

Have you requested a permit earlier this calendar year: _____

Please provide a copy of your organization's 501 © (3) status if applicable.

Date Received: _____

Receipt: _____