

CITY OF CLEBURNE
P.O. Box 677 - Cleburne, Texas 76031
817-645-0900
CHAPTER 111. PUBLIC AMUSEMENT

SECTION 111.01. APPLICATION FOR CARNIVALS, CIRCUSES & SIMILAR SHOWS

Name of Carnival, circus or show: _____

Address: _____

Telephone Number: _____

Owner(s): _____

Sponsor of show: _____

Address: _____

Telephone Number: _____

Person in Charge: _____

Date(s) of event: _____

Location: _____

Permission granted by: _____

Describe how parking and traffic will be handled. Attach a rough drawing showing the location:

SECURITY:

Name of Liability Insurance Co.: _____

Amount of Insurance: _____

Officers hired: Yes _____ No _____ Number _____

HEALTH & SANITATION:

Briefly describe how health and sanitation will be handled in the area of restrooms, electricity, trash, etc.:

Public Works Permits needed: _____ Health Permits needed: _____

Describe booths or concessions: _____

SECTION 111.01(C). PERMIT

For Official Use Only

Cleared by the following officials signatures:

Fire Chief:

Police Chief:

Public Works Director:

Health Official:

Final Permission City Manager:

Date: