

APPLICATION FOR PERMIT IN THE CITY OF JACKSON, GA

TYPE OF PERMIT – PLEASE CHECK ALL THAT APPLY:

- Group Demonstration
- Group Assembly
- Picket
- Parade

Date of Event: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Requested hours such event will begin and end: \_\_\_\_\_

Requested assembly areas: \_\_\_\_\_

(A) Name of Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

(B) If the Event is proposed to be conducted for, on behalf of, or by an organization, please furnish name, address and telephone number of the organization's headquarters and the applicant shall file with this application a written communication from the organization which authorizes the applicant to apply for the permit.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name (s) of authorized, responsible persons of this organization must also be listed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(C) Name, address, social security number and telephone number of the person (s) who will be the event chair person:

\_\_\_\_\_  
\_\_\_\_\_

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**(D)** Requested route to be traveled (Starting and Ending):

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**(E)** Approximate number of persons, types of animals, and description of vehicles:

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**(F)** Requested use of streets, i.e., entire street or only a portion of street (s):

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**(G)** Interval of space requested between units of such event:

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The undersigned responsible party represents that he or she is familiar with the content of Article II, Section 50-31 through Section 50-101 of the Code of Ordinances of the City of Jackson. The undersigned represents that he or she is the person in charge or chair person of the permitted activity and, as such, hereby assumes responsibility for any damage to any public or private property that results from the activity and hereby indemnifies and holds harmless the City from any liability to participants or third parties for property damage or personal injury which results from the activity.

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Signature of Responsible Party

DATE: \_\_\_\_\_

Date Received by Police Chief: \_\_\_\_\_

Approved

Denied

Permit Conditions: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Reason for Denial: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Police Chief Mike Riley

Date: \_\_\_\_\_

Date Received by City Clerk: \_\_\_\_\_

Approved

Denied

\_\_\_\_\_  
Signature of City Clerk, Lara Brewer

Date: \_\_\_\_\_