Office: (903)432-3522 ext.101 Fax: (903)432-3867

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## **Carnival & Circus Permit**

Applicant Name Business Name				
Address		City	State	Zip
Contact Number(s)		Alternate		
Event Address				
Date(s) of Event:		Hour(s) of Ever	nt	
Please list of any wild or exotic	c animals to be used	l		
You must attach a copy of you		•		
The above-described applicant Tool in accordance with Article	t has been granted	a permit to conduct a C	Carnival or Cir	cus in the City of
Effective Date	Date of Expiration			
Signature of Applicant		Approved By S	Signature	
Form of Payment:	<u>Permi</u>	<u>t Fee</u> \$50.00		Other