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CIRCUS LICENSE	CARNIVAI	_ LICENSE	MASS GATHERING LICENSE
NAME OF EVENT:			
NAME OF SPONSOR:			
LOCATION OF EVENT:			
SET UP DATE OF EVENT: (Setup date required to be 24 hours	CLEA1 s prior to date of event)	N UP DATE OF EV	/ENT:
TOTAL NUMBER OF DAYS FO	OR EVENT:		
SIGNATURE OF APPLICANT: _		I	DATE:
***************************************	********	******	*********
			med applicant for the specified dates, signee and submittal of the following
Sketch plan for the event, no	t just where on the proper	ty the event will tal	ce place.
Signed and dated agreement	with the Landowner for u	se of the property f	or that event.
Corporate Bond/Certificate of	of Insurance.		
written descriptive plan, that	adequate facilities will be	e provided (ex. wate	er/wastewater)
*********	*******	******	*********
We have inspected the above even issuance of a license for			and State Codes. We hereby approve through
Police	Department		Health Officer
Fire D	Department	Date Issued:	