



SPECIAL EVENT PERMIT APPLICATION

Submit application at least **30 days prior to the event**.
The approval process can take up to thirty (30) days. Please plan with this time in mind when making commitments, advertising, etc.
Please read PAGE 3 before completing this application.

EVENT INFORMATION

NAME OF EVENT: Cullman Warehouse District Annual Spring Street Sale

DATE(S) OF EVENT: Friday, April 10th, and Saturday, April 11th

TIME(S) OF EVENT: 9:00 am - 6:00 pm

EVENT TYPE:

- 5K/10K Run → **Must call City Hall at 256-775-7104 re: route.**
- Parade/Procession
- Race/Ride
- Festival/Concert
- Protest/Picket/Rally → **Must call CPD (256-734-1434) for rules.**
- Block Party
- Other Cullman WHD Annual Spring Sale

DESCRIPTION OF EVENT: _____
Annual Spring Street Sale

SIZE OF EVENT (Estimated Maximum Attendance)

- Small Event** (<500 persons)
- Medium Event** (500-5000 persons)
- Large Event** (5000+ persons)

! For large events, event safety and operational plans **MUST** be submitted with this application.

TYPE OF PROPERTY TO BE USED: (Check all that apply.)

- Public Street and/or Sidewalk**
- City Park/Recreational Facility**

! Parks/Recreational Facilities **MUST** be reserved through **CPRST BEFORE** submitting this application (see page 6).

Name of Park or Facility: _____

Name of CPRST employee who authorized use: _____

- Property Owned by Someone Else**

! Property Owner/Manager **MUST** authorize use of property. Page 8 is provided for this purpose, if needed.

Name of Owner/Manager: _____

Is the Owner/Manager's written authorization attached?
 _____ **YES** _____ **NO**

- EVENT ORGANIZER -

Name: Tanya Carter

Title: Owner, Wren + Revel

Organization: Cullman Warehouse District

Address: 103 1st Avenue NE, Suite 120,
Cullman, AL 35055

Phone Number(s): 256-385-1420

Email Address(es): tanya@wrenandrevel.com

- FOR ADMINISTRATIVE USE ONLY -

DATE SUBMITTED: 04/06/2026

DEPARTMENTAL INITIAL REVIEWS

MAYOR'S OFFICE

Approved Conditionally Approved Denied

Comments/Concerns: _____

DocuSigned by:
Woody Jacobs April 6, 2026 | 2:
Mayor Date

POLICE DEPARTMENT

Approved Conditionally Approved Denied

Comments/Concerns: _____

Joey Duncan/pl April 6, 2026
Police Chief or Designee Date

FIRE DEPARTMENT

Approved Conditionally Approved Denied

Comments/Concerns: _____

Signed by:
Darren Peoples April 6, 2026 | 2:14 PM CDT
Darren Peoples Date
Fire Chief or Designee

CPRST

Approved Conditionally Approved Denied

Comments/Concerns: _____

Nathan Anderson/pl April 6, 2026
CPRST Director or Designee Date

WHAT IS A SPECIAL EVENT PERMIT AND WHAT IS CONSIDERED A SPECIAL EVENT?

Special Event Permits are issued to individuals or organizations planning to hold special events within the Cullman city limits. A special event is an event involving: The closing and/or use of public roads, sidewalks, parks & recreational facilities, or other public property within the Cullman city limits or that involve amplified speaking/music or other types of excessive noise within the Cullman city limits, whether on public or private property. Other events may also fall under the category of "special event." If you are unsure whether your event qualifies as a "special event," contact the City Clerk's Office (see page 6).

PROCEDURE FOR OBTAINING A SPECIAL EVENT PERMIT

1. Completed, signed applications should be submitted to the City Clerk's office at least thirty (30) days prior to the event.
2. Your application will be reviewed by the City Clerk's office to verify that the application is valid and complete.
3. Your application will then undergo initial review by the Police Department, Fire/Rescue Department, CPRST, and Mayor.
4. Your application will then be added to an upcoming City Council meeting agenda. (Contact the City Clerk's office for the date and time of the City Council meeting at which your application will be considered – see page 6 for contact info.)
5. Once your application is approved by the City Council, the Special Event Permit will be issued by the Mayor.

RULES & REGULATIONS REGARDING SPECIAL EVENTS



Applicant shall provide to the City detailed plans as required per City Ordinance to allow the City to evaluate and assure that the proposed event will not pose an unreasonable danger to public health and safety and will not excessively burden municipal resources without adequate planning so as to create such a danger. A site map for the event illustrating the location of any tents, stages, viewing platforms, port-a-lets, parking, waste receptacles, etc., shall also be provided.

- Use of city parks & recreational facilities MUST be authorized by CPRST (see page 6) prior to submitting this application.
- Events involving the sale and/or consumption of alcohol beverages require additional permits and/or licenses. You MUST contact CPRST (256-734-9157) prior to submitting this application.
- If you use property belonging to a third party, written authorization from property owner/manager is required (see page 8).
- If streets are closed for the event, you MUST attach written consent from all affected property owners/managers (see page 7) and ensure that adequate ingress & egress paths for fire, medical, & police emergency response is maintained.
- If your event is a race, run, or walk, you MUST contact the City Clerk's Office for the preferred route (see page 6).
- Events involving the use of vendors require additional permits and/or licenses from the City Clerk's Office (see page 6).
- If food trucks are used, food truck vendors MUST have a current inspection on file with the Fire Marshal (see page 6).
- Events involving loud noise or amplified music MUST conclude at 10PM, unless another time is approved by the City Council.
- Events involving pyrotechnics must be submitted 30 days prior to the event and you MUST contact the Fire Marshal for additional city and state requirements (see page 6).
- If assistance is needed from a city department, you MUST contact the department to coordinate said assistance (see page 6).
- You must contact local public safety officials and follow all local and state rules, regulations, ordinances, and adopted codes.
- You are responsible for costs incurred for city assistance (police/fire/EMT services, barricades, etc.), unless otherwise noted.

RIGHTS RESERVED BY THE CITY OF CULLMAN

The City of Cullman reserves the right to:

- Approve any event subject to requirements and ordinances of the City of Cullman concerning public safety.
- Intervene if the application and/or planning of the event presents potential and significant traffic issues, public safety issues and/or excessive noise complaints, or any other issues/disturbances which have a high likelihood to occur based on the totality of the circumstances surrounding the event, or which do occur, and take appropriate measures to resolve these issues up to and including the revocation of any Special Event Permit issued.
- Revoke the Special Event Permit should the event organizer (or agents thereof) fail to abide by any of the special event rules, regulations, or agreements.
- Suspend or revoke any Special Event Permit should circumstances beyond either party's control change significantly enough to warrant said suspension or revocation.



SPECIAL EVENTS ARE NOT AUTHORIZED UNTIL: (1) THE CITY COUNCIL GRANTS APPROVAL; (2) THE EVENT ORGANIZER OBTAINS/SUBMITS ALL REQUIRED PERMITS/LICENSES/AUTHORIZATIONS; (3) EVENT ORGANIZER PAYS ALL REQUIRED FEES/COSTS; (4) THE SPECIAL EVENT PERMIT IS SIGNED BY THE EVENT ORGANIZER AND THE MAYOR.


EVENT LOCATION & ADDRESS (attach map or diagram): _____


Cullman Warehouse District, 1st Avenue NE from Flavors to If the Shoe Fits

1. **IS THIS A 501(c)(3) CHARITY EVENT?** YES NO

If YES: _____
Entity Name _____ 501(c)(3) Number _____

2. **ARE YOU REQUESTING THE CLOSING OF PUBLIC STREETS OR SIDEWALKS?** YES NO

 If event involves closing streets or sidewalks, you **MUST** have written approval of all property owners/managers or residents affected by the closing. Page 7 is provided for this purpose, if needed.

 You **MUST** ensure that adequate ingress and egress paths for fire, medical, and police emergency response is maintained at all times; coordinate closely with local public safety officials; and follow all rules, regulations, ordinances, and adopted codes of the City of Cullman and the State of Alabama.

If YES, list streets/sidewalks to be closed (attach map or diagram). _____
Cullman Warehouse District, 1st Avenue NE from Flavors to If the Shoe Fits

3. **WILL YOU REQUIRE THE USE OF CITY-OWNED BARRICADES OR BOLLARDS?** YES NO

Event organizer responsible for arranging use of city barricades or bollards and paying applicable costs (see page 6).

4. **WILL YOUR EVENT INCLUDE AMPLIFIED MUSIC/SPEAKING OR OTHER EXCESSIVE NOISE?** YES NO

 Events involving amplified music, speaking, or other excessive noise as defined by the City's noise ordinance **shall conclude by 10PM**, unless otherwise noted. Complaints will be investigated by the Cullman Police Department.

If YES, describe: _____

5. **WILL ALCOHOL BE SERVED DURING THIS EVENT?** YES NO

 If YES, you **MUST CONTACT CPRST (256-734-9157) BEFORE SUBMITTING THIS APPLICATION!** Also, any event involving alcohol require a **minimum of two (2) police officers** on site at the expense of the event organizer.

 Have you contacted CPRST concerning serving alcohol at your event? YES NO

6. **WILL YOUR EVENT INCLUDE FOOD OR DRINK VENDORS?** YES NO

Event organizer shall be responsible for obtaining all necessary permits, licenses, and permissions. (See page 6.)

7. **WILL ANY VENDORS BE USING FOOD TRUCKS AT THE EVENT?** N/A YES NO

Food truck vendors are required to have a current inspection on file with the Fire Marshal's office (See page 6.)

8. **WILL YOUR EVENT INCLUDE VENDORS OF CRAFTS OR OTHER ITEMS?** YES NO

Event organizer shall be responsible for obtaining all necessary permits, licenses, and permissions. (See page 6.)

9. **WILL YOUR EVENT INVOLVE PYROTECHNICS (fireworks, etc.)?** YES NO

Per City Ordinance, this application must be submitted to the City Council for approval 30 days prior to the date of the event and the event planner is required to contact the Fire Marshal's office regarding additional city and state requirements. (See page 6.)

10. **ARE YOU REQUESTING POLICE SERVICES OR ARE POLICE SERVICES REQUIRED?** YES NO

If YES, how many are you requesting? _____

 Minimum of 2 officers required at events involving alcohol, at organizers expense. Chief has final discretion on services & number of officers. *In the interest of health, safety & welfare of citizens & attendees, rates for large ticketed events with an estimated 20,000+ attendees per day per site = \$55 (non-alcohol) & \$60 (alcohol) during event only, accounting for reasonable time prior to & after event.

OFF DUTY POLICE RATES PER HOUR	
\$45.00*	NORMAL RATE
\$50.00*	RATE IF ALCOHOL SERVED
- MINIMUM 4 HOURS -	

11. **ARE YOU REQUESTING FIRE, EMT AND/OR TELECOMMUNICATOR SERVICES?** YES NO

If YES, how many are you requesting? _____

 Fire/EMT/Telecommunicator personnel provided at organizer's expense. Chief has final discretion on what services & personnel are required. **AMBULANCE TRANSPORT NOT INCLUDED.** *In the interest of the health, safety & welfare of citizens & attendees, rates for large ticketed events with an estimated 20,000+ attendees per day per site = \$55 (non-alcohol) & \$60 (alcohol) during event only, accounting for reasonable time prior to & after event.

OFF DUTY FIRE/EMT/TC RATES/HR	
\$45.00*	NORMAL RATE
\$50.00*	RATE IF ALCOHOL SERVED
- MINIMUM 4 HOURS -	

12. **WILL YOUR EVENT INVOLVE THE USE OF PORTABLE TOILETS?** YES NO

Event organizer shall be responsible for obtaining all necessary permits, licenses, and permissions. (See page 6.)

13. **ANY ADDITIONAL COMMENTS, INFORMATION, OR REQUESTS?** YES NO

Event organizer is responsible for coordinating and paying costs associated with any assistance needed from city departments upon event approval.
City of Cullman | CullmanAL.gov | 256-775-7109 | cityhall@cullmanal.gov | 204 2nd Avenue NE | P.O. Box 278 | Cullman, AL 35056

If YES, please use this space:

EVENT ORGANIZER ACKNOWLEDGEMENT & SIGNATURE

BY SIGNING BELOW, I HEREBY ACKNOWLEDGE THAT:

1. I have read and completely understand the procedure for requesting a Special Event Permit, the rules and regulations regarding special events, and the rights reserved by the City of Cullman.
2. I understand and agree to abide by the afore-mentioned procedures, rules, and regulations as well as all other local, state, or federal rules, regulations, and laws that are applicable to my event.
3. I understand that it is my responsibility to contact the appropriate department(s) to coordinate any assistance that may be needed and that I shall be responsible for any costs that may be associated with any departmental assistance that is either requested by me or required by the City of Cullman.
4. I understand that it is my responsibility to contact the appropriate department(s) to ensure that any other applicable permits, licenses, or permissions are obtained; and that failure to do so will result in the revocation of any Special Event Permit issued.
5. I understand that submitting this application is not a guarantee that my special event will be approved; and I understand that my event is not fully approved until the City Council authorizes it, all requirements are met, all fees/costs are paid, and the Special Event Permit is signed and issued by the Mayor.
6. This application is complete and the information contained herein is true and correct to the best of my knowledge.

<p><small>Signed by:</small>  _____ Signature of Event Organizer</p> <p>Tanya Carter _____ Printed Name</p> <p>Cullman Warehouse District _____ Business or Organization Name (if applicable)</p>	<p>April 6, 2026 9:58 AM CDT _____ Date</p> <p>Owner, Wren + Revel _____ Title (if applicable)</p>
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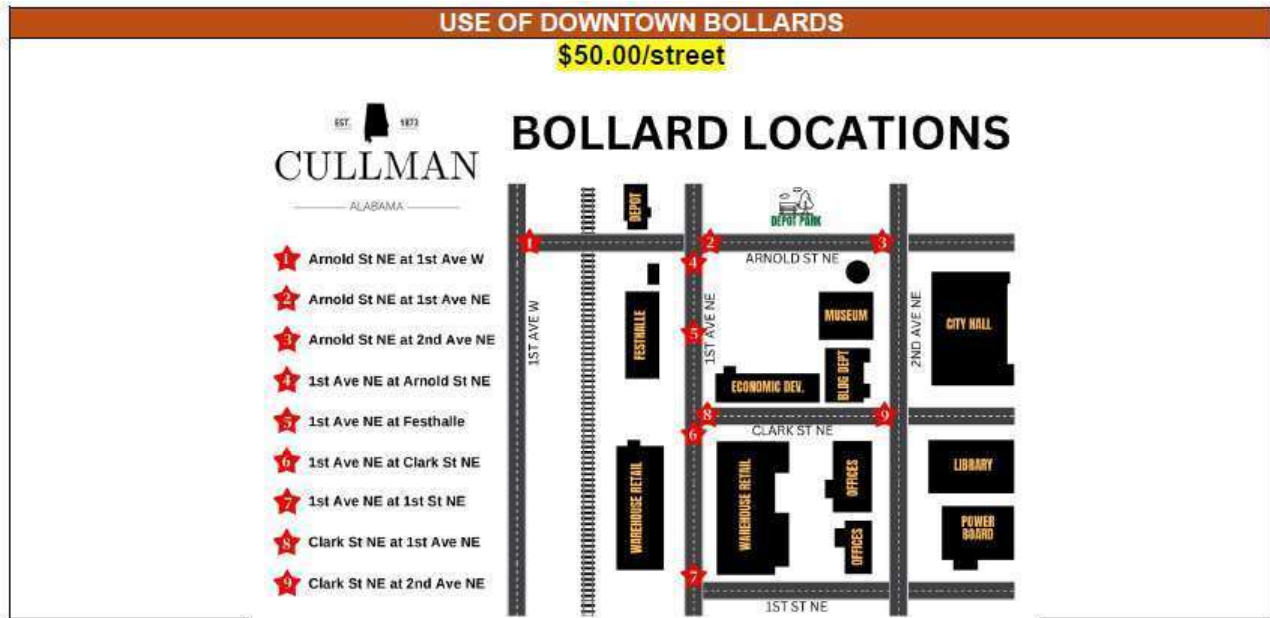
APPLICATION CHECKLIST

- | | | | |
|--|---|-----------------------------|---|
| ✓ I HAVE CONTACTED THE CITY CLERK'S OFFICE REGARDING RACE/RUN ROUTE. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE CONTACTED CPRST TO RESERVE A PARK OR FACILITY. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE CONTACTED CPRST REGARDING ALCOHOL AT THIS EVENT (Q. 5). | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE ATTACHED A DETAILED SAFETY PLAN AND SITE MAP. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE INCLUDED A MAP OF STREET CLOSINGS AND/OR RACE ROUTES. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| ✓ I HAVE INCLUDED SIGNATURES OF PROPERTY/BUSINESS OWNERS/MANAGERS APPROVING STREET/SIDEWALK CLOSURES. (Q. 2) | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| ✓ I HAVE CONTACTED THE FIRE MARSHAL ABOUT THE USE OF FOOD TRUCKS (Q.7). | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE CONTACTED THE FIRE MARSHAL ABOUT THE USE OF PYROTECHNICS (Q.9). | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE INCLUDED WRITTEN AUTHORIZATION BY THE PROPERTY OWNER/MANAGER TO USE PROPERTY NOT BELONGING TO ME FOR MY EVENT. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE CONTACTED THE CPD FOR RULES REGARDING PROTESTS, RALLIES, ETC. | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input checked="" type="checkbox"/> N/A |
| ✓ I HAVE READ AND UNDERSTAND THE PROCEDURES, RULES, & REGULATIONS FOR APPLYING FOR AND CARRYING OUT A SPECIAL EVENT IN CULLMAN (PAGE 4). | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |
| ✓ I HAVE READ AND UNDERSTAND THE RIGHTS RESERVED BY THE CITY OF CULLMAN AS OUTLINED ON PAGE 4. | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> N/A |

INCOMPLETE APPLICATIONS CANNOT BE PROCESSED, SO PLEASE MAKE SURE THAT ALL QUESTIONS ARE ANSWERED AND ALL REQUIRED DOCUMENTATION IS ATTACHED BEFORE SUBMITTING.

- ADDITIONAL INFO -

You may be required to contact a department or agency regarding your permit. It is your responsibility to ensure that all applicable permits and licenses are obtained and to coordinate assistance through the appropriate department(s). **COSTS MAY BE INCURRED FOR SOME SERVICES FOR WHICH EVENT ORGANIZER SHALL BE RESPONSIBLE.** IF YOU'RE UNSURE ABOUT WHAT PERMITS/LICENSES/PERMISSIONS ARE REQUIRED, CONTACT THE CITY CLERK'S OFFICE.



CULLMAN CITY HALL

Phone: (256) 775-7109 | Email: cityhall@cullmanal.gov

CITY CLERK'S OFFICE

For general info; obtain race/walk/parade routes; obtain permits or licenses for vendors; submit payment for fees or costs for services.

Location: City Hall, 204 2nd Avenue NE, Cullman, AL 35055
 Phone: (256) 775-7109 | Email: pleslie@cullmanal.gov
 Web: cullmanal.gov/depts/admin

CPRST (PARKS, RECREATION, & SPORTS TOURISM)

To check availability of and reserve parks or recreational facilities; obtain permits for events involving alcohol consumption/sales.

Location: 703 2nd Avenue NE, Cullman, AL 35055
 Phone: 256-734-9157 | Email: info@cullmanrecreation.org
 Web: www.cullmanrecreation.org

CULLMAN FIRE RESCUE | FIRE MARSHAL

For inspection of food trucks; obtain permits for pyrotechnics, fires, etc.; request fire/paramedic/telecommunicator services; coordinate ingress/egress for fire/medical emergencies.

Location: 1920 Butler Street NW, Cullman, AL 35055
 Phone: (256) 775-7186 | Web: cullmanal.gov/depts/fire/
 Email: ataylor@cullmanal.gov (general)
 Email: jbutler@cullmanal.gov (Fire Marshal)

CULLMAN COUNTY HEALTH DEPARTMENT

To obtain applicable permits for the preparation and sale of food; to obtain applicable permits for the use of portable toilets.

Location: 601 Logan Avenue SW, Cullman, AL 35055
 Phone: (256) 734-1030
 Web: www.alabamapublichealth.gov/cullman

MAYOR'S OFFICE

To obtain the official Special Event Permit after City Council authorization and after all other requirements have been met.

Location: City Hall, 204 2nd Avenue NE, Cullman, AL 35055
 Phone: (256) 775-7102 | Email: lwest@cullmanal.gov
 Web: cullmanal.gov/government/mayor

CULLMAN POLICE DEPARTMENT

To request police and/or traffic control services; coordinate safety & traffic control; for rules & laws concerning protests, rallies, etc.

Location: 601 2nd Avenue NE, Cullman, AL 35055
 Phone: (256) 734-1434 | Email: cullmanpd@cullmanal.gov
 Web: cullmanal.gov/depts/cpd/

CITY STREET DEPARTMENT

To coordinate the use of city-owned barricades for street and/or sidewalk closures.

Location: 69 Mitchell Road NE
 Cullman, AL 35055
 Phone: (256) 775-8441
 Web: cullmanal.gov/depts/streetdept

LEGAL OFFICE

For questions regarding permit rules & regulations or questions of a legal nature.

Location: City Hall, 204 2nd Avenue NE, Cullman, AL 35055
 Phone: (256) 775-7105
 Email: lsatterfield@cullmanal.gov

COUNCIL MEETING INFORMATION

City Council meetings are normally held on the 2nd & 4th Monday of each month at 7PM in the City Hall auditorium (unless otherwise announced).

www.CullmanAL.gov

- PRINT ADDITIONAL COPIES, AS NEEDED -

STREET CLOSING APPROVAL FOR SPECIAL EVENT

(Complete only if you are requesting the CLOSING of a street or streets for your event.)

STREET(S)/SIDEWALK(S) REQUESTING TO CLOSE FOR EVENT: _____

Spring Street Sale (Closing from Flavors to If the Shoe Fits)

Event Organizer: Tanya Carter Phone: 256-385-1420

Address: 103 1st Avenue NE, Suite 120, Cullman, AL 35055 Email: tanya@wrenandrevel.com

Date(s) of Street Closing: Friday, April 10th, and Saturday, April 11th Time(s) of Street Closing: 9:00 am - 6:00 pm

Name/Description of Event: Cullman Warehouse District Annual Spring Street Sale

AUTHORIZED SIGNATURE(S) OF PROPERTY OR BUSINESS OWNER(S)/MANAGER(S) MUST BE COLLECTED TO SHOW APPROVAL OF STREET CLOSURE (you may use additional pages, if necessary, or your own form):

Signature _____ Printed Name _____ Title _____

Business Name (if applicable) _____ Business Address _____

Phone Number _____ Email Address _____ APPROVE CLOSING? YES NO

Signature _____ Printed Name _____ Title _____

Business Name (if applicable) _____ Business Address _____

Phone Number _____ Email Address _____ APPROVE CLOSING? YES NO

Signature _____ Printed Name _____ Title _____

Business Name (if applicable) _____ Business Address _____

Phone Number _____ Email Address _____ APPROVE CLOSING? YES NO

Signature _____ Printed Name _____ Title _____

Business Name (if applicable) _____ Business Address _____

Phone Number _____ Email Address _____ APPROVE CLOSING? YES NO

- PRINT ADDITIONAL COPIES, AS NEEDED -

THIRD-PARTY PROPERTY OWNER APPROVAL

Event Organizer: Cullman Warehouse District Annual Spring Street Sale Phone: 256-385-1420

Address: 103 1st Avenue NE, Suite 120, Cullman, AL 35055 Email: _____

Date(s) of Closing: _____ Time(s) of Closing: _____

Name/Description of Event: Cullman Warehouse District Annual Spring Street Sale

Location of Event: Cullman Warehouse District, 1st Avenue NE from Flavors to If the Shoe Fits

I, THE UNDERSIGNED, AM THE OWNER/MANAGER/REPRESENTATIVE OF THE ABOVE-REFERENCED PROPERTY AND I AUTHORIZE THE EVENT ORGANIZER TO USE SAID PROPERTY FOR THE ABOVE-REFERENCED EVENT.

Signature Printed Name

Address

Phone Number Email Address

I, THE UNDERSIGNED, AM THE OWNER/MANAGER/REPRESENTATIVE OF THE ABOVE-REFERENCED PROPERTY AND I AUTHORIZE THE EVENT ORGANIZER TO USE SAID PROPERTY FOR THE ABOVE-REFERENCED EVENT.

Signature Printed Name

Address

Phone Number Email Address

I, THE UNDERSIGNED, AM THE OWNER/MANAGER/REPRESENTATIVE OF THE ABOVE-REFERENCED PROPERTY AND I AUTHORIZE THE EVENT ORGANIZER TO USE SAID PROPERTY FOR THE ABOVE-REFERENCED EVENT.

Signature Printed Name

Address

Phone Number Email Address

I, THE UNDERSIGNED, AM THE OWNER/MANAGER/REPRESENTATIVE OF THE ABOVE-REFERENCED PROPERTY AND I AUTHORIZE THE EVENT ORGANIZER TO USE SAID PROPERTY FOR THE ABOVE-REFERENCED EVENT.

Signature Printed Name

Address

Phone Number Email Address

- PRINT ADDITIONAL COPIES, AS NEEDED -

STREET CLOSING APPROVAL FOR SPECIAL EVENT

(Complete only if you are requesting the CLOSING of a street or streets for your event.)

STREET(S)/SIDEWALK(S) REQUESTING TO CLOSE FOR EVENT: _____
Spring Street Sale (Closing from Flavors to If the Shoe Fits)

Event Organizer Tanya Carter Phone 256-385-1420
 Address 103 1st Avenue NE, Suite 120, Cullman, AL 35055 Email tanya@wrenandreve.com
 Date(s) of Street Closing Friday, April 10th and Saturday, April 11th Time(s) of Street Closing 9:00 am - 6:00 pm
 Name/Description of Event Cullman Warehouse District Annual Spring Street Sale

AUTHORIZED SIGNATURE(S) OF PROPERTY OR BUSINESS OWNER(S)/MANAGER(S) MUST BE COLLECTED TO SHOW APPROVAL OF STREET CLOSURE (you may use additional pages, if necessary, or your own form):

[Signature] Ryne Ashley Owner
 Signature Printed Name Title
Recreational Development
Ashley Mercantile 105A 1st Ave N.E
 Business Name (if applicable) Business Address
(256) 747-5508 N/A APPROVE CLOSING? YES NO
 Phone Number Email Address

[Signature] Carly Mills Shift Lead
 Signature Printed Name Title
Taco Mav 105 1st Ave NE
 Business Name (if applicable) Business Address
256 727 3936 APPROVE CLOSING? YES NO
 Phone Number Email Address

[Signature] Buyerina (same) Owner
 Signature Printed Name Title
Modest Fashion 104 First Ave NE Cullman
 Business Name (if applicable) Business Address
256 917 8823 APPROVE CLOSING? YES NO
 Phone Number Email Address

[Signature] Jose Camps _____
 Signature Printed Name Title
Beards & More 100 1st Ave ne
 Business Name (if applicable) Business Address
256 - 930 - 6023 APPROVE CLOSING? YES NO
 Phone Number Email Address

- PRINT ADDITIONAL COPIES, AS NEEDED -

(Example: City of Cullman, Alabama, 2024-04-04, 10:00 AM - 12:00 PM)

FORM APPROVED BY THE CITY OF CULLMAN

STREET CLOSING APPROVAL FOR SPECIAL EVENT

(Complete only if you are requesting the CLOSING of a street or streets for your event.)

STREET(S)/SIDEWALK(S) REQUESTING TO CLOSE FOR EVENT:

Event Organizer: _____ Phone: _____
 Address: _____ From: _____
 Date(s) of Street Closing: _____ Time(s) of Street Closing: _____
 Name/Description of Event: _____

AUTHORIZED SIGNATURE(S) OF PROPERTY OR BUSINESS OWNER(S)/MANAGER(S) MUST BE COLLECTED TO SHOW APPROVAL OF STREET CLOSURE (you may use additional pages, if necessary, or your own form):

Kalief Signature Katie Fine Printed Name owner Title
Karma's Coffee House Business Name (if applicable) 103 1st Ave NE Suite 140 Business Address
256 912 2909 Phone Number karmascOFFEEHOUSE@gmail.com Email Address APPROVE CLOSING? YES NO

[Signature] Signature Emily Bussman Printed Name owner Title
Cups n Strokes Business Name (if applicable) 102 1st Ave NE Business Address
256 338 0333 Phone Number cullman@cupnstroke.com Email Address APPROVE CLOSING? YES NO

Leldon Maxey Signature Leldon Maxey Printed Name owner Title
Leldon's Business Name (if applicable) 117 1st Ave NE Business Address
256 339 4413 Phone Number leldonmaxey@gmail.com Email Address APPROVE CLOSING? YES NO

Alyssa Gun Signature Alyssa Jackson Printed Name Manager Title
Lavish Business Name (if applicable) 103 1st Ave NE Business Address
256 887 3177 Phone Number @lavishboutiquecullman Email Address @yahoo.com APPROVE CLOSING? YES NO
 - PRINT ADDITIONAL COPIES, AS NEEDED -

Printed name of the person who is submitting this form

PRINT ADDITIONAL COPIES, AS NEEDED

STREET CLOSING APPROVAL FOR SPECIAL EVENT

(Complete only if you are requesting the CLOSING of a street or streets for your event)

STREET(S)/SIDEWALK(S) REQUESTING TO CLOSE FOR EVENT:

Event Organizer _____ Phone _____
 Address _____ Email _____
 Date(s) of Street Closing _____ Time(s) of Street Closing _____
 Name/Description of Event _____

AUTHORIZED SIGNATURE(S) OF PROPERTY OR BUSINESS OWNER(S)/MANAGER(S) MUST BE COLLECTED TO SHOW APPROVAL OF STREET CLOSURE (you may use additional pages, if necessary, or your own form):

Tanya Carter
Signature

Tanya Carter
Printed Name

OWNER
Title

WREN + REVEL
Business Name (if applicable)

103 1st Avenue, Ste 120
Business Address

256 385-1420
Phone Number

tanya@wrenandrevel.com
Email Address

APPROVE CLOSING? YES NO

Holly McLeod
Signature

Holly McLeod
Printed Name

Owner
Title

Kennel Kullman
Business Name (if applicable)

1131st Ave NE
Business Address

256 341-6299
Phone Number

info@kennelkullman.com
Email Address

APPROVE CLOSING? YES NO

Cassie Ward
Signature

Cassie Ward
Printed Name

Owner
Title

Urban Pine
Business Name (if applicable)

106 1st Ave NE
Business Address

256 339
Phone Number

106.cassieward@gmail.com
Email Address

APPROVE CLOSING? YES NO

Signature

Printed Name

Title

Business Name (if applicable)

Business Address

APPROVE CLOSING? YES NO

Phone Number

Email Address

- PRINT ADDITIONAL COPIES, AS NEEDED -

DocuSign Envelope ID: EEF5CDA6-C787-849D-836B-5E334A563DC9

PRINT ADDITIONAL COPIES, AS NEEDED

STREET CLOSING APPROVAL FOR SPECIAL EVENT

(Complete only if you are requesting the CLOSING of a street or streets for your event)

STREET(S)/SIDEWALK(S) REQUESTING TO CLOSE FOR EVENT _____

Event Organizer _____ Phone _____
 Address _____ Email _____
 Date(s) of Street Closing _____ Time(s) of Street Closing _____
 Name/Description of Event _____

AUTHORIZED SIGNATURE(S) OF PROPERTY OR BUSINESS OWNER(S)/MANAGER(S) MUST BE COLLECTED TO SHOW APPROVAL OF STREET CLOSURE (you may use additional pages, if necessary, or your own form)

[Signature] Ronda Crabtree owner
 Signature Printed Name Title
Sipsey Winery 112 Clark St NW Cullman
 Business Name (if applicable) Business Address
256 347-1119 rondacrabtree@sipseynine.com APPROVE CLOSING? YES NO
 Phone Number Email Address

[Signature] Rita Dean owner
 Signature Printed Name Title
Platform 115 1st Ave NE
 Business Name (if applicable) Business Address
256-347-0567 ritavdean@gmail.com APPROVE CLOSING? YES NO
 Phone Number Email Address

[Signature] Rita Dean owner
 Signature Printed Name Title
Taylor + Co 101 1st Ave NE
 Business Name (if applicable) Business Address suite 120
256-347-0567 ritavdean@gmail.com APPROVE CLOSING? YES NO
 Phone Number Email Address

 Signature Printed Name Title

 Business Name (if applicable) Business Address

 Phone Number Email Address APPROVE CLOSING? YES NO
 - PRINT ADDITIONAL COPIES, AS NEEDED -