City of Danville
Special Event Permit Report

EVENT ORGANIZER: _____ **CONTACT NUMBER(S):**_____

EVENT DATE(S):_____ **NAME OF EVENT:** _____

Business Name	Address	City	State	Zip	Total Due	BUSINESS LIC #
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Please return this spreadsheet and payment to the Finance Department 5 business days prior to the event.
Questions can be directed to Leigh Compton 859-238-1200, ext 2340, or Email: lcompton@danvilleky.gov

For Office Use Only:

Amount Received: $_____ Date Received:_____