PUBLIC PROPERTIES & FACILITIES NAMING APPLICATION

Jurisdiction: City Council District		
Date Filed	Fee Paid	Application No.
Name of Applicant		
Address of Applicant		
Public Property and Facility Re-naming:		
Present Property/Facility Name		
Proposed Property/Facility Name		
Location of Property/Facility Proposed for Renaming		
D C D IN :		
Reason for Proposed Naming		
Have met all criteria required for re-naming (Please check)		
That's met an effecta required for to maining (Flouse check)		
Public Property and Facility Naming:		
Proposed Property/Facility Name		
Location of Property/Facility		
Have met all criteria required for naming (Please check)		
All CORRESPONDENCE RELATING TO THIS APPLICATION SHOULD BE SENT TO:		
Full Name	Street Address, City, State, Zip Code	Phone / Fax
APPLICATION ACCEPTED BY:		
D.4 (III)		

Please complete the request form and submit it and the \$262 request fee to the City Recorder's Office.

Mailing Address: City Recorder's Office PO Box 1631 Knoxville, TN 37901

Physical Address: City Recorder's Office 400 Main St, Suite 460 Knoxville, TN 37902

You will be notified of the date and time of the committee meeting when your request will be considered. Requesters should make every effort to attend the meeting in order to respond to questions from the committee members.

Approved requests are sent to the Mayor for review. The request along with the Mayor's written recommendation, if any, is then placed on the City Council agenda for consideration.

The request fee may only be refunded by action of the committee.