



**Application for Shooting Gallery
State of Tennessee
City of Crossville**

I hereby make application for a permit to operate a shooting gallery and base my application upon the answers to the following questions:

1. Full name of applicant (owner): _____
2. Applicant's Social Security #: _____ Date of Birth: _____ Driver's License: _____
Home Telephone: _____ Business Telephone: _____
3. What is your present home address? _____

4. Previous address(es) (within last 10 years): _____

5. Qualified voter in Cumberland County? Yes No
6. Type of Ownership:
 Person Firm Corporation Joint-Stock Co. Syndicate Association
 Limited Liability
List all persons, firms, corporations, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet showing name, social security number, and driver's license number, length of time each has been a resident of Cumberland County and whether or not each is a qualified voter of Cumberland County,). _____

7. Name and Principal address of Corporation, Joint-Stock Co., Syndicate, Association, Limited Liability Company:

8. Under what name will this business operate? _____

9. Location of business, or special event, by street address or other geographical description and phone number of the business: _____

10. Specify the identity and address of the person to receive annual privilege tax notices and any other communication from the City: _____

11. Give name and address of property owner, if other than business owner: _____

12. Give the type and caliber of arms proposed to be used and full description of the manner and plan for stopping and controlling bullets or other ammunition proposed to be used _____

13. Give name, date of birth, and address of any manager other than the applicant:

14. *(The City of Crossville has adopted a rule forbidding the location of a shooting gallery within 1,000 feet to the entrance of any school, churches, or hospital as measured in a straight line from main entrance to main entrance.)*

15. What is the name and address of the school nearest to your business? _____

16. What is the name and address of the church (or other place of worship) nearest to your business?

17. What is the name and address of the church nearest to your business? _____

I am knowledgeable of the laws and regulations for a shooting gallery and the facility will meet all standards and regulations of the City of Crossville.

Signature of Applicant/Owner (or Authorized Corporate Officer)

Date

Sworn to and subscribed before me this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____

FOR CITY USE ONLY:

MAP NO. _____
PARCEL NO. _____
DISTANCE FROM NEAREST SCHOOL _____
DISTANCE FROM NEAREST CHURCH _____
DISTANCE FROM NEAREST HOSPITAL _____

Distances shall be measured from main entrance to main entrance.

APPROVAL OF CHIEF OF POLICE:

_____ DATE _____

CITY OF CROSSVILLE, TENNESSEE
392 N. Main St.
Crossville, TN 38555

PERMIT FOR SHOOTING GALLERY

DATE: February 17, 2017

TO: TERRY D. HASSLER

1576 N. Main St.

Crossville, TN 38555

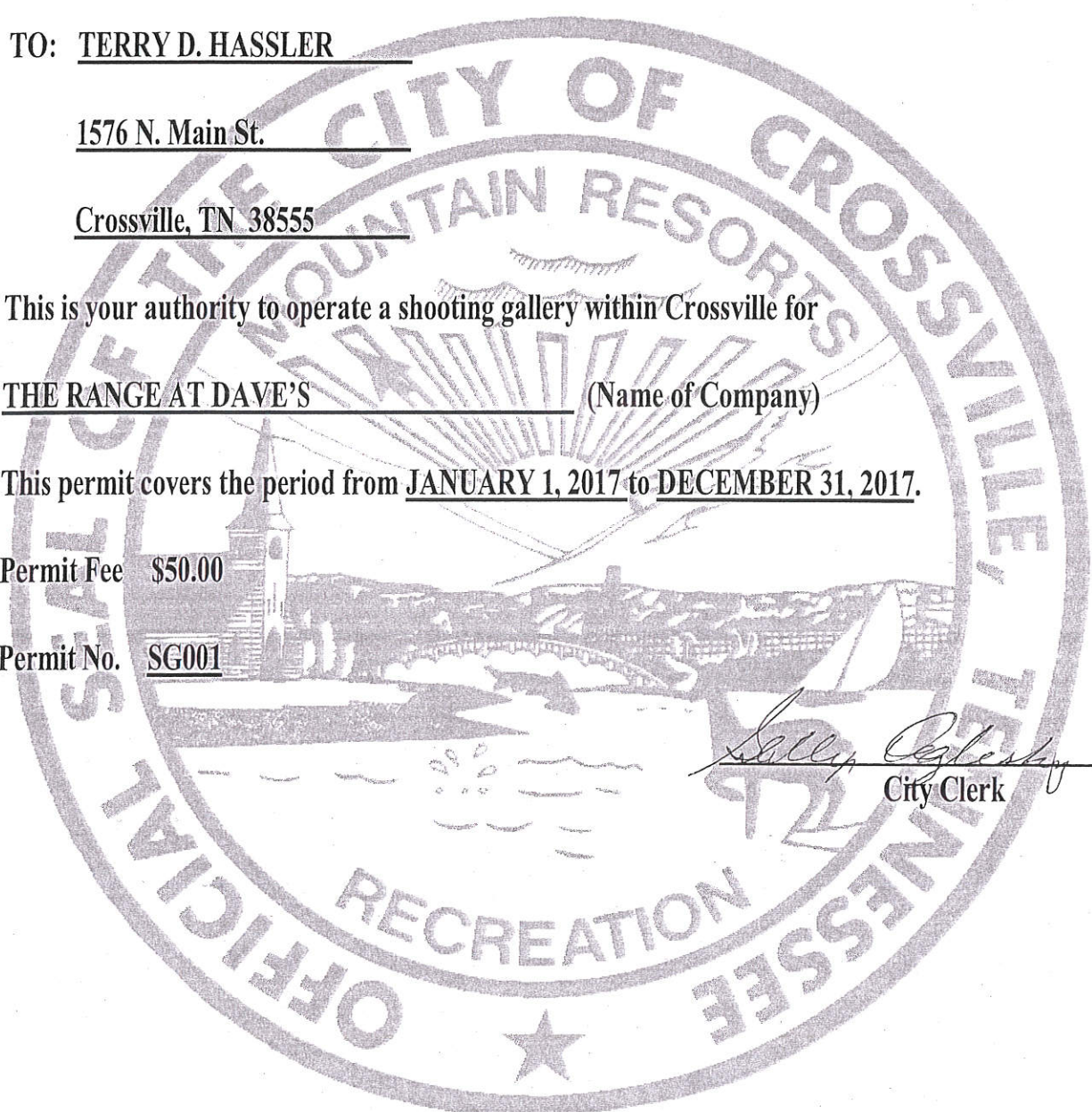
This is your authority to operate a shooting gallery within Crossville for

THE RANGE AT DAVE'S (Name of Company)

This permit covers the period from JANUARY 1, 2017 to DECEMBER 31, 2017.

Permit Fee \$50.00

Permit No. SG001

The seal is circular with a double border. The outer border contains the text "OFFICIAL SEAL OF THE CITY OF CROSSVILLE, TENNESSEE" in a circular arrangement. The inner border contains the text "MOUNTAIN RESORTS" at the top and "RECREATION" at the bottom, separated by a five-pointed star at the bottom center. The central image depicts a landscape with a church steeple on the left, a bridge over a river in the middle, and a sailboat on the right. A sunburst is visible behind the bridge.
Sally C. Cagle
City Clerk