



# 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: \_\_\_\_\_

Reason for Proposed Naming: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have met all criteria required for re-naming (Please check)

## Public Property and Facility Naming:

Proposed Property/Facility Name: \_\_\_\_\_

Location of Property/Facility: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have met all criteria required for re-naming (Please check)

**ALL CORRESPONDENCE RELATING TO THIS APPLICATION SHOULD BE SENT TO:**

\_\_\_\_\_  
Name (Print) Address \* City \* State \* Zip \* Phone \* Fax

**APPLICATION ACCEPTED BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

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.