

FOR DEPARTMENT USE ONLY:

Date received: \_\_\_\_\_

Date approval: \_\_\_\_\_

**CITY OF CROSSVILLE, TENNESSEE**  
**ANIMAL CONTROL APPLICATION PROCESS**

1. Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Address of where animal will be located: \_\_\_\_\_

4. Types of animal(s) on the property: \_\_\_\_\_

5. Type of structure(s) on property? ☐ Fence ☐ Coop ☐ Barn ☐ Lean-to ☐ Other

(If other, please explain \_\_\_\_\_)

THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. APPLICANT DECLARES THEY OWN/LEASE/HAVE PERMISSION TO USE THE PROPERTY WHERE THE ANIMAL(S) WILL BE HELD.

BY: \_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

**Mail/deliver to:** Crossville Police Department, ATTN: Animal Control, 115 Henry Street, Crossville, TN 38555-4275 **Or email to:** [info@crossvilletn.gov](mailto:info@crossvilletn.gov) with the subject line **ANIMAL CONTROL**

**FOR OFFICE USE ONLY:**      **Approval:**      ☐ **Recommended**      ☐ **Not Recommended**

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

**COMPLIANCE**

Inspection report complete

☐ **Yes** ☐ **No** \_

Within 1,000 feet boundary

☐ **Yes** ☐ **No**\* \_

\*If NO, permit is not required.

**If not recommended, list reason why:** \_\_\_\_\_