

PIKE COUNTY BOARD OF COMMISSIONERS
P.O. Box 377 • 331 Thomaston Street
Zebulon, GA 30295

J. Briar Johnson, Chairman
Tim Daniel, Commissioner
Tim Guy, Commissioner
Ken Pullin, Commissioner
James Jenkins, Commissioner

**APPLICATION
FOR USE OF
COURTHOUSE/GROUNDS**

Rob Morton, County Manager
Angela Blount, County Clerk/ HR
Heather Bell, Accounts Payable
Clint Chastain, Finance Administrator
Joann Wrye, Payroll/HR Assistant

**Please return completed form,
along with any cover letter/email, to:**

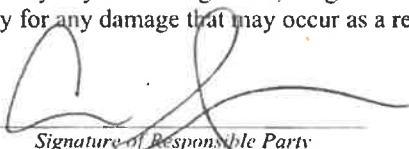
**Pike County Board of Commissioners
ablount@pikecoga.gov**

Responsible Person: Cami Hoopes
Address: 7818 HWY 19 S
City, ST ZIP: Zebulon GA 30295
Phone (most accessible): 770 567 8748
Email: choopes@zebulonga.us

Date(s)/Time(s) of use: Saturday, October 31 4pm - 10 pm
Group requesting use: City of Zebulon
Name of event: Trick or Treating on the Square
Type of event: Community Event
Specific areas of use: Grounds, Stairs
(grounds, porch, bldg.)
Open to general public: _____ Number expected: 500
Equipment to be used on grounds (chairs, tables, electrical, etc.): Tables, chairs, Blowups for kids, DJ equipment
When will equipment be set up? 4-5pm taken down? 10 pm
Will food be served? yes for a fee? yes
Has this group used Courthouse/grounds for other events? yes Were any problems encountered? no
If so, what dates and/or problems? September 5-7th, 2025, Bicentennial Event

Applicant's Certification and Agreement

I certify that I have been provided and read Section 34.05 of the Pike County Code of Ordinances, entitled "Use of Courthouse Grounds" in Chapter 34 of "County Courts" of Title III entitled "Administration." I understand that the Courthouse grounds shall be left in a clean and neat condition after use. I affirm that I, as the responsible entity, am liable for all damages, expenses and loss caused by any person who attends or participates in the scheduled event. By my below signature, I agree to defend and hold harmless the County for any damage that may occur as a result of this scheduled event.


Signature of Responsible Party

7/14/26
Date

For Official Use Only by Staff:

Date: 7/14/2026
Clerk received/researched 7/14/2026
CM approval/disapproval [Signature]
SO approval/disapproval [Signature]
Staff Recommendation _____
BOC approval/disapproval _____
Date Applicant notified _____