## **GROUNDBREAKING REQUEST FORM 2025**



## **COMPANY INFORMATION**

Company	225 Church Street NW Huntsville, AL 35801			
Contact				
Title	fax 256-535-2015			
Physical Address of Event			nsvcnamber.org	
City	State	Zip		
Phone	Fax			
Email Address				
Website				
Parking Notes				
PREFERRED DATES PREFERRED TIMES		NES		
First Preference		First Preferen	First Preference	
Second Preference		Second Prefer	Second Preference	
Third Preference		Third Preferen	Third Preference	
IMPORTANT: A Chamber representative will contact you wi upon request approval. Cancellation with a refund to a cred		• • •	• •	
Member Signature		Date		
CHAMBER STAFF ONLY:				
Date Chamber representative contacted Member			Initials of Chamber representative	
Date Chamber representative submitted request form			Type of Event $\ \square$ public $\ \square$ private	
Date Ribbon Cutting service fee was paid in full $$			Initials of Accounting representative	
<b>APPROVAL</b> The Ribbon Cutting request referenced above is approve	d for the followir	ng:		
DATE	TIM			
Chamber Representative Signature				