



**CITY OF SALEM**

**Salem City Hall, 93 Washington Street, Salem, MA 01970**

**Flag Raising Application**

DATE OF REQUEST: \_\_\_\_\_

APPLICANT NAME (organization): \_\_\_\_\_

CONTACT NAME (If different): \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ STATE: \_\_\_\_ ZIP: \_\_\_\_\_

DATE of FLAG RAISING: \_\_\_\_\_ TIME: \_\_\_\_\_

REQUESTED DURATION OF FLAG TO BE FLOWN\*: \_\_\_\_\_

\*Please Note Flags Are Typically Flown no more than Two Weeks

DESCRIPTION OF FLAG: \_\_\_\_\_

\*Please include image of flag

Will you require a sound system? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Have you read the City of Salem's Flag Raising Policy? Yes: \_\_\_\_\_ No: \_\_\_\_\_

List of events and/or speakers:

\_\_\_\_\_  
\_\_\_\_\_

Individuals for special recognition: \_\_\_\_\_

\_\_\_\_\_

Approved: Yes: \_\_\_\_\_ No: \_\_\_\_\_

Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Mayor Dominick S. Pangallo