Village of Florida Facility Use Permit



Receipt of the app	olication is not a guarantee of facility use.			
Today's Date	<u> </u>			
Type of Facility	Requested \square Park Pavilion \square Field \square Senio	or Center		
Name of Facility				
Name of Resident	z/Applicant			
Organization (if a	pplicable)			
	All paperwork, including any refunds, w	_		
Is your Organizat	ion: 501 (C), Not for Profit, or Non-Profit? \Box Ye	s □ No If yes, please attach	а сору.	
Address				
City	State	Zip Code		
Phone numbers:	\ <u>-</u>	Cell		
Email Address	Work	Fax		
	rt			
,				
	Event Details			
Name of Event		Expected Attendance	ce	
Type of Event		Estimated # of Vehicles		
Description of Ev	ent/Activities	#of Parking waivers if needed		
If use of facility re	equires any special setup, traffic control, etc., please	a complete Special Requests Se	ction helow	
Special Requests	equires any special setup, traine control, etc., picaso	complete special requests se	etion below.	
	Event Dates and Time	es		
Day(s) of Week	Date(s) (mm/dd/yy) Please include all setup & taked	lown time Start Time	End Time	
	Zace (o) (mm) way yyy r rease merade an secup & taket	Dear time	Ziiu iiiic	

Additional Information

Please	e answer all questions correctly. Unanswered questions may delay y	our request.	
1.	Is this event open or advertised to the public?*	Yes□	No □
2.	Is this a fundraising/revenue producing event? *	Yes□	No □
3.	Will there be soliciting or selling of any kind? *	Yes□	No □
4.	Will you be charging a fee for this event? If yes, how much?	Yes □	No □
5.	Will you be using a caterer? If yes, please fill out information below:	Yes □	No□
	Contact Person	<u></u>	
1. 2. 3. 4.	ORTANT CONSIDERATIONS: Consumption, sale or distribution of alcoholic beverages is prohibited. A Business License may be required for the sale of any item Discharge of fireworks or other explosives is prohibited. Bathrooms are closed seasonally. Port o Potties are available.		
1 2 3 4	UIREMENTS: Applicant is required to pay facility fee upon submission of per Applicant is required to provide the Town with a refundable depending on size and type of event upon approval of permit Applicant is required to provide proof of insurance (\$1,000 Addt'l Insured) prior to the event indemnifying the Village NOTE: Certificate Holder MUST be addressed to: Village of Florida NY 10921. No costs are to be incurred by the Village. All costs, direct associated with the event are the responsibility of the application Applicant agrees to abide by all Village of Florida rules and researched.	le damage deposit (if applicable). ,000 LIABILITY w/ Vi se of Florida of any s of Florida,33 South I or indirect, ant.	illage as liability.
r	LE WAIVERS MUST DE REQUESTED IN WRITING		

RULES/REGULATIONS/INDEMNIFICATION

 $Please\ READ\ CAREFULLY.\ Complete\ and/or\ initial\ on\ the\ following\ important\ policies, rules\ and\ regulations:$

☐ Request fee waiver explanation attached

a. For proof of Village/Town of Warwick residency, please attach a copy of your **VALID** driver's license (MUST be 18 & over for Facility Permits) or a current, electric/cable bill or a Village Tax Bill. All applications are approved on a case by case basis, subject to certain restrictions and availability of

facility and staff.

- b. Set-up/clean-up/removal of decorations will be the responsibility of the group. Please include this in your requested time. You will not be given access prior to the time scheduled on your permit. Non-compliance of this policy will cause forfeiture of the refundable security deposit. The deposit will be refunded to the applicant if the facility is left clean and free of damage.
- c. If group is an organization, issue refundable deposit to: ______Allow at least 14 working days
- d. **Consumption of alcohol is prohibited.** Violation of this regulation will mean forfeiture of the refundable security deposit and cancellation of your event at time of infraction.
- e. Parking is only permitted in designated areas. No parking on grass or walkways.
- f. Other permits may be required depending on the type of event (i.e. Special Events, Fundraisers, Films/Photoshoots, Sale of Food.)
- g. Law Enforcement intervention due to violation of rules and regulations will mean cancellation of event and may incur additional charges, affect future use and forfeiture of any remaining fees and security deposit paid.
- h. **Cancellation Policy:** Facility Use Permits are **NON-REFUNDABLE**. **NO EXCEPTIONS**.
- i. Changes made to the dates, times, number of attendees, etc. after the permit has been processed will be assessed a permit revision fee or may result in **new permit fees** (case by case basis).___(initial)
- j. Any cost incurred due to damage to the facility/grounds or due to law enforcement intervention arising from the group's event will be billed to the group.
- k. Payments may be in the form of **cash, check or money order**. All deposits and fees *must* be paid in full no less than two weeks prior to being issued a valid Facility Use Permit. Checks *must* be payable to the Village of Florida.. In the event of a bounce check, fees will be applied.

FEES

Village of Florida /Town of Warwick Resident \$50.00 use fee \$100.00 Deposit Outside Warwick Resident \$250.00 use fee \$250.00 Deposit

*If the applicant provides false information such as: purpose of event, names & addresses of event holder(s), number of persons in attendance, etc., the event may be cancelled prior or during the event at the discretion of the Town Staff and may result in forfeiture of fees and deposits and/or denial of current and future applications for use of Department facilities and may incur additional Town charges.

*I certify that I have read and understand all the rules and regulations governing the use of the parks and facilities. I, the undersigned, do hereby agree that we will abide by the policies governing the use of the parks and will be responsible for any damages to the parks, facility, furniture, or equipment caused by our occupancy of the property. I understand that any false information provided or violation of any rules and policies will result in immediate cancellation of our event and will cause forfeiture of all fees and deposits. __(initial)

Village of Florida 33 South Main St Florida, NY 10921

VILLAGE OF FLORIDA PARKS & RECREATION INDEMNIFICATION FOR USE OF FACILITIES & PROPERTY

I hereby certify that I am authorized to issue contracts on my own behalf or that of the organization listed which I represent. I further certify that I have read the rules, regulations, conditions and terms of the Village of Florida Parks & Recreation application for a Facility Use Permit. In consideration for my or my organization's use of the facilities and/or property owned or operated by the VILLAGE as listed, I hereby agree on behalf of myself and my organization, if any, as follows:

- 1. That I and my organization will abide by all rules and regulations of the Village and all other directives of the Village.
- 2. That I and my organization will indemnify and hold harmless the Village, its officers, agents, representatives and/or liability, including legal costs and attorneys' fees, that may result from any death or injury to persons or damage to property that may result from my or my organization's use of the facilities and/or property, whether such death or injury or damage to property is caused by the passive or active negligent act or omission of the Village except that this indemnification shall not apply to any loss rising solely from the intentional or willful misconduct of the Village.
- 3. That neither myself nor any one of my organization shall make any claim against the Village, its officers, agents, representatives and/or employees for any injury or liability which I have indemnified the Village.
- 4. That I personally and on behalf of my organization will conduct a reasonable safety inspection of the Village facilities and/or property and all grounds, structures or buildings used by me and/or my organization immediately prior to use of the facilities and/or property, and will bring any conditions creating any hazard to the attention of appropriate Village representatives. My signature below signifies my agreement to the rules, regulations, policies and Village Indemnification.

Signature of Applicant:		Date:
NO REFUNDS!!!	FOR OFFICE USE ONLY	PERMIT NO
□ APPROVED □ DENIED (If so,	REASON):	PAYMENT TYPE:
□ SECURITY DEPOSIT / TYPE:		
□ FEE WAIVER REQUESTED		
FEE REQUIRED:	FEE PAID:	CHECK NO CREDIT CARD CASH
-	NO AMOUNT (\$1,000,000 LIABILITY W/VILLAG	·
STAFF SIGNATURE / DATE		