



FACILITIES USE REQUEST

Minimum Liability Insurance Requirement:
Injury - \$500,000 Property Damage - \$500,000

Non-Profit: ___ Yes ___ No Fee (if applicable): _____

Organization Name: _____ Today's Date: _____

Name of Event: _____

<u>Event Date(s)</u> (please include day(s) of week & date)	<u>Time of Events</u>	<u>Time Including Setup/Tear Down</u>
_____	_____	_____
_____ (Rain date)	_____	_____

Site Requested: _____

Pavilion Rental (\$25 per day): ___ Makle Park ___ Rive Park "Green Roof Pavilion"

Plans for parking: _____

Describe activities at event (i.e.: Picnic, Live Music, Marathon, etc....) _____

Port-o-Pots? ___ yes ___ no If so, how many? _____

Please provide a map showing location(s) of Port-o-pots.

Anticipated attendance: _____ people Will a fee be charged? ___ Yes ___ No

List at least one, but preferably two, responsible officials from your organization who will be present at the event and will accept full responsibility for adherence to Borough regulations by all person in attendance.

(Please Print Legibly)

- Name: _____ Address: _____
Phone: _____ Email Address: _____
- Name: _____ Address: _____
Phone: _____ Email Address: _____

Equipment/Personnel required:

- | | | |
|---------------------------|------------------|------------------------------|
| ___ Police Services | ___ Custodian | ___ Highway Personnel |
| ___ Municipal Parking Lot | ___ Safety Cones | ___ Street Barriers/Postings |
| ___ Fire Police Services | ___ Other _____ | |

*****The Borough has the right to assign additional security and other personnel as needed.
Your organization will be subject to fees for these services*****

PLEASE NOTE:

- Clean-up and removal of all trash produced at an event is the responsibility of the event host. Failure to remove all trash could result in a fine of up to \$500.00.
- Certificate of Insurance must be submitted at least two weeks prior to the event unless the event affects a state roadway. In this case the Certificate of Insurance is due upon submission of the Facilities Use Request. Insurance requirements are as follows: Minimum coverage of \$500,000.00 for bodily injury and \$500,000.00 for property damage.

I hereby certify that I have read, understand, and agree to adhere to this policy of Columbia Borough concerning Use of Facilities. Further, my organization forever releases Columbia Borough, Mayor, Council Members, Columbia Borough Officials, their doctors, agents, employees and servants from all claims, actions, and charges whatsoever arising out of the event(s) conducted on the above-mentioned dates(s) for which the application is submitted. My organization will defend all actions, suits, complaints, or legal proceedings of any kind brought against the Borough and any of its agents, servants, or employees and further will hold harmless and indemnify the said, Mayor, Council Members, and Borough Officials from any expenses, judgments or decrees recovered against them as a result of said use of these facilities. The provisions of this Application and this paragraph extend to the applicant's successors, assigns, heirs, and personal representatives.

RESPONSIBLE ORGANIZATION OFFICIAL:

_____ (Name – PLEASE PRINT) _____ (Signature)

Billing Address: _____

Phone: _____ E-mail: _____

APPROVAL SIGNATURES:

Borough Manager _____ Date _____

Police Chief _____ Date _____

*****Please note that this form does not include any fees newly established by the Borough for 2019. Should any new fees be established your organization will be notified immediately*****

For Borough Use Only:

Date Received: _____

Date forwarded to Council/Borough Manager/Police Chief/EMS/QRS/Fire Dept./Fire Police: _____

Date response from above required: _____