

Application for City Park Use Sponsoring Organization

Date of Application: _____ **Application Fee:** \$15.00

Name of Applicant: _____

Name of Person/Organization (other than applicant):

Physical Address: _____

Mailing Address: _____

Telephone Number: _____

Purpose for Park Usage: _____

Date and Hours for requested Usage: _____

Park or Area of Park Requested: _____

Number of expected event attendance (including the maximum total and highest attendance for each day) _____

The following items will need to be returned with completed application before any application can be accepted.

1. Attach a copy of articles of incorporation or other organizational documentation and evidence of tax-exempt status (if any) for any organization applying as sponsoring organization.
2. Attach a copy of a rental agreement or other documentation for the evidencing that portable toilets or restroom facilities will be available at any event where more than 300 people are expected to attend.
3. Attach a copy of liability insurance coverage that will cover injuries to members of the general public arising out of such permitted activities in the amount of \$1,000,000.00.
4. Attach a list of persons and qualifications of security company or individual law enforcement personnel whom the applicant will utilize for security of this event.
5. If application is approved the applicant will be required to provide a \$100.00 clean-up deposit. If proper clean-up is done the deposit will be returned to applicant.

The City Council shall have the authority to revoke a permit upon a finding of violation of any rule or ordinance or upon good cause shown.

Signature of Applicant: _____

Office Use Only:

Approved Denied

Signature

**CITY OF BLUE RIDGE
480 WEST FIRST ST
BLUE RIDGE, GA. 30513
706-632-2091**

PERMIT FOR VENDORS

PERMIT #1120

TODAY'S DATE _____

DATE PAID _____

AMOUNT PAID _____ **(\$50.00 FEE- PER PERMIT)**

PRODUCT _____

VENDOR'S
NAME _____

ADDRESS _____

CITY _____ **STATE** _____

TELEPHONE # _____

NAME OF THE EVENT _____

DATE OF EVENT _____

THIS PERMIT MUST BE DISPLAYED IN A VISIBLE LOCATION

**CITY OF BLUE RIDGE
3101 EAST FIRST ST
BLUE RIDGE, GA. 30513
706-632-2091**

PERMIT FOR PARADES

N/C

TODAY'S DATE

DATE OF PARADE

SPONSOR FOR PARADE

**TIME OF DAY THE PARADE WILL BE
CONDUCTED**

STARTING POINT FOR THE PARADE

ENDING POINT FOR THE PARADE

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