

# FACILITY REQUEST FORM



Today's Date \_\_\_\_\_

Name of Organization and Name of Requestor \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

<b><u>Greenview Park</u></b>	<b><u>P.V. Park</u></b>	<b><u>Woodland Lake</u></b>	<b><u>Town Hall</u></b>
Pavilion _____	Swim Lanes _____	*Fire Pit _____	Basketball Court #1 _____
Picnic Area _____	*Fire Pit _____		Basketball Court #2 _____
*Fire Pit _____	<b><u>Mountainside Park</u></b> _____	<b><u>Grill(s)</u></b> _____	

**Other (Please specify)** \_\_\_\_\_

*\*Must see Fire Safety to obtain fire permit*

Day Of The Week	Date	Time
_____	_____	_____
_____	_____	_____

**Purpose** \_\_\_\_\_ **Anticipated Attendance** \_\_\_\_\_

**Total \$** \_\_\_\_\_ **Cash \$** \_\_\_\_\_ **Check \$** \_\_\_\_\_

## GREENVIW PARK PARTIES: ALL TRASH MUST BE BAGGED AND THROWN AWAY IN THE DUMPSTER AT THE END OF PARKING LOT C

Parks/Facilities are afforded "as-is" and the permit holder is responsible to visually inspect the facilities prior to use and should avoid use if any unsafe conditions are identified. These conditions shall be reported to the Parks and Recreation Office.

I hereby attest that I have been informed of the following pertaining to the coronavirus:

People who are 65 years and older and people of any age who have serious underlying medical conditions or are at a higher risk for severe illness from COVID-19 are recommended to stay at home. A list of medical conditions associated with the higher risk for severe illness from COVID-19 can be found in CDC's guidance. Individuals and families should consult their healthcare provider to determine whether they have medical conditions that place them at risk.

Staff and children living in households with individuals who are 65 years and older OR have higher risk for severe illness from COVID-19 are recommended to stay home.

\_\_\_\_\_  
**Parks and Recreation Signature**

\_\_\_\_\_  
**Advisor Signature**

I have read the rules & regulations and Township ordinances and agree to abide by and enforce them. I further agree to be responsible for any damage arising from the use of the facility.

## **FACILITY PERMIT POLICIES**

### **A. APPLICATIONS FOR FACILITIES USE**

1. Group leader shall complete a facility request form, provided by the Department.
2. Group leader must submit said form to Parks Department for signature and approval. (Permit is not valid unless signed).
3. Original copy must be filed with the Department office. Copy to be retained by group leader.
4. Applications for facility use should be made at least once a week in advance to assure availability.

### **B. ISSUING PERMITS BY THE DEPARTMENT**

1. Township residents and organizations are given top priority.
2. Permits may be issued with time limitations noted, if need be, to accommodate a number of requests.
3. The Department also reserves the following rights:  
Pavilion fee: \$35.00 for residents, \$85.00 for non-residents  
***A \$50 security deposit to guarantee repairs to damaged facilities may be required.***

### **C. ORDINANCES REGARDING FACILITY USAGE**

While using a park facility, no person shall:

1. Disfigure or remove any park property.
2. Consume or have in possession ALCOHOLIC BEVERAGES.
3. Smoke on Township property.
4. Litter facility grounds.
5. Loiter in or around facility or park.
6. Park unlawfully. (Park vehicle in other than a designated area.)
7. Bring or have in possession fireworks and/or explosives.
8. Build or attempt to build fires in areas other than those designated.
9. Conduct themselves in disorderly fashion.

### **D. ORDINANCES REGARDING FACILITY USAGE FEES**

1. No. 2010-6 Chapter 129

2. No. 2017-17 Chapter 129

**Violation of any or all of the above ordinances will result in denial of future facility requests.**

### **E. RESPONSIBILITIES OF PERMIT HOLDER**

1. Have the copy of original signed permit readily available and must display upon request.
2. Relinquish rights of facility at stated time on permit.
3. Aware of Township ordinances and abide by them.

### **F. Certificate Of Insurance**

**All organizations/groups hosting large gatherings/camp-outs MUST submit a Certificate of Insurance (COI) naming Pequannock Township as additionally insured. This includes, but not limited to schools, scouts, non-profits and for-profit groups. The reservation will only be put on the calendar when the COI and the completed Facility Request Form are submitted to this office. If any group is bringing in outside vendors, the Township also requires a COI from them as well.**