

# Facility Fee Waiver Application

Please read and carefully complete the following application. Failure to provide accurate information may result in a delay or denial of your request for a fee waiver. Please attach a copy of your Facility Rental Application to this form and return to the Department of Parks and Recreation.



*Submission of this application does not guarantee rental of facility.*

## A. CONTACT INFORMATION

Name of Group/Organization \_\_\_\_\_

Is this a non-profit organization  YES  NO Tax ID # (Non-profit only) \_\_\_\_\_

Applicant Name/Person Responsible \_\_\_\_\_ Title \_\_\_\_\_

Cell Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## B. FACILITY INFORMATION

Indicate the specific facility or facilities for which you are requesting a fee waiver

- |   |  |
|---|--|
| FREEDOM PARK RECREATION CENTER                | FREEDOM PARK ATHLETIC FIELD                |
| HUNTINGTON PARK COMMUNITY CENTER              | KEVIN DE LEON SOCCER FIELD                 |
| RAUL R. PEREZ MEMORIAL PARK RECREATION CENTER | RAUL R. PEREZ MEMORIAL PARK ATHLETIC FIELD |
| ROBERT H. KELLER PARK                         | ROBERT H. KELLER PARK PICNIC SHELTER       |
| SALT LAKE PARK CLUB ROOM # _____              | SALT LAKE PARK BALL FIELD # _____          |
| SALT LAKE PARK BATTING CAGES                  | SALT LAKE PARK GYMNASIUM                   |
| SALT LAKE PARK LOUNGE                         | SALT LAKE PARK SOCIAL HALL                 |
| SALT LAKE PARK SOCCER SQUARE                  | SENIOR PARK                                |
| OTHER _____                                   |  |

## C. EVENT INFORMATION

1. Event Description (provide a detailed description of the event, its purpose, and the activities that will take place).

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

Anticipated Daily Attendance \_\_\_\_\_ Anticipated Total Attendance \_\_\_\_\_

2. Is your organization an official non-profit organization 501(c)3?  Yes  No  
• If yes, list the non-profit tax ID number \_\_\_\_\_

3. Will you be charging a fee for this event?  Yes  No  
• If yes, list all fees \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Will the event be open to the public?

Yes

No

5. Is this event a fundraiser?

Yes

No

#### D. EVENT DATES AND TIMES

Set-up Date(s) \_\_\_\_\_ Set-up Start Time \_\_\_\_\_

Event Start Date(s) \_\_\_\_\_ Event Start Time \_\_\_\_\_

Event End Date \_\_\_\_\_ Event End Time \_\_\_\_\_

Breakdown Date(s) \_\_\_\_\_ Breakdown End Time \_\_\_\_\_

#### E. FEE WAIVER INFORMATION

Please complete **ONLY** the section which applies to your event (Intergovernmental Cooperation, Non-Profit, Private Business or Organization or City Sponsored Event)

**Intergovernmental Cooperation (Applicant is a government agency)**

Name of Specific Department/Unit Responsible for Event \_\_\_\_\_

How does this event benefit the residents of Huntington Park? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why is it necessary to hold this event at a City facility? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Non-Profit Organization**

**Private Business, Organization or Individual**

\*Non-profit organization will be required to provide verification of tax-exempt status.

Do you provide a service solely to the residents of Huntington Park?  YES  NO \_\_\_\_\_

Indicate the negative impact or financial hardship that the normal facility fees would create for your event or agency. You may attach a budget or financial statement for your organization to clarify the reason for your fee waiver request.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What significant value or benefit will your event provide to Huntington Park residents?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**City-Sponsored Event**

See the Park Facility Use Fee Waiver Policy for details about City-sponsored event requests.

Does your organization have, or is it in the process of receiving, a tax-exempt status?  YES  NO

Explain why the City should be a co-sponsor of your event:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**F. FEE WAIVER REQUEST**

Are you requesting a 100% waiver of all applicable rental fees?  YES  NO

If "NO" which fees are you requesting to be waived? (Note: refundable security deposit may not be waived)

- Facility Fee \$ \_\_\_\_\_
- Personnel (Staffing) \$ \_\_\_\_\_
- Janitorial \$ \_\_\_\_\_
- Equipment/Material \$ \_\_\_\_\_

**G. REVIEW PROCESS**

You will be notified within 5 business days of submission of your application whether your request has been denied or will be referred to the City Manager, PARC Commission, and/or City Council for review. Fee waiver requests less than \$250 in indirect fees may be considered by the City Manager, PARC Commission and/or City Council. For additional details, review the Park Facility Use Fee Waiver Policy.

**H. Applicant Signature**

I understand and agree to abide by all of the Facility Fee Waiver and Facility Rental regulations of the City of Huntington Park and any other conditions imposed for the event requested. I certify that all statements made on this application are true and complete to the best of my knowledge. I understand that any false statement may result in denial of the requested permit or revocation of any issued permit.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

--STAFF USE ONLY--					
APPLICATION RECEIVED BY	DATE RECEIVED	APPLICATION APPROVED BY			
ALL CRITERIA FOR FEE WAIVER HAS BEEN MET?	<input type="checkbox"/> YES <input type="checkbox"/> NO	FEE WAIVER STATUS	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> CONDITIONAL
TOTAL FEES WAIVED \$	FACILITY FEES DUE	LIGHT FEES DUE			
STAFF FEES DUE	CHALKING FEES DUE	TOTAL DUE			
APPROVED BY _____					