

FACILITY USE PERMIT APPLICATION

Today's Date: 3/20/19

Renter Information	Applicant Name (hereinafter "Renter"): Salvadoran Committee, COSPU		Birthdate of Applicant: 5/12/64	
	Authorized Agent for Renter: (may be the same as the applicant) Nelly Moreno Shenk			
	Phone: 540-209-1341	Fax:	Email: cospuva@gmail.com	
	Address: 110 Old South High St.	City: Harrisonburg	State: VA	Zip: 22801
Rental/Event Information	Facility Requested: (include room location if applicable) Smithland Soccer Field Complex		Date(s) Requested: August 11, 2019	
	Hours of Rental: Begin: 9 am End: 5 pm	Set-up Time to Begin: 5 am	Clean Up Time to End: 8 pm	
	Type of event to be held (i.e. baby shower, birthday party, family reunion etc.): Hispanic Festival		Anticipated Attendance: (Required) 2,500	
	# of Tables: <u>30</u>	Ongoing Rental? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Participation Fee Charged? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Vendors? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, number attending: 8-10
Additional Event Information	For a complete listing of the rules and regulations for use of a facility owned and/or managed by the City of Harrisonburg Parks and Recreation Department, see the attached <u>Facility Use Policies</u> .			
	Should any of the services below be self provided, please write the word "SELF" on the blank line. Please check all that apply & provide the name of the company and the contact information for the company providing these services on the corresponding blank line:			
<input checked="" type="checkbox"/> Inflatable Device(s) <u>FUN JUMPS INFLATABLES</u> (Allowed in designated facilities only)				
<input type="checkbox"/> Music (Recorded) _____				
<input checked="" type="checkbox"/> Music (Live) <u>SALSABURGH, ATRAPADO MUSICAL, LATIN CLAVE</u>				
<input checked="" type="checkbox"/> Amplifying Devices Or Loud Speakers <u>Atrapado Musical, Latin Clave</u>				
<input type="checkbox"/> Audio/Visual Equipment _____				
<input type="checkbox"/> Catered Event _____				
<input type="checkbox"/> Other _____				

The undersigned hereby acknowledge that a copy of the **Facility Use Policies** containing the rules and regulations for use of facilities owned and/or managed by the City of Harrisonburg Parks and Recreation Department has been received and read, and understands and agrees to abide by these rules and regulations governing the use of the Facility being rented.

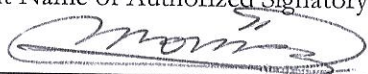
The undersigned person executing this Application on behalf of the Renter represents and warrants that he/she has full authority to sign this Application on behalf of the Renter and that he/she has the authority to fully bind the Renter to the terms and conditions set forth in this Application.

Nelly Moreno Shenk

3/20/19

Print Name of Authorized Signatory

Date



Treasurer

Sign Name of Authorized Signatory

Title

110 Old South High St

Harrisonburg

VA

22801

Address

City

State

Zip Code

Facility Rental Insurance

Applicant Name or Permit Renter (Individual or Company): COSPU, Salvadoran Committee

Insurance is required and must be submitted in advance for:

- An ongoing rental permit**
- Service(s) being provided by a third party/vendor (e.g. caterer, DJ, bounce house)**

Without limiting PERMIT APPLICANT'S indemnification of the CITY, and during the term of this Agreement, PERMIT RENTER shall provide and maintain at its own expense the below described programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY.

Certificates or other evidence of coverage shall be delivered via email, fax or US mail.

Certificate Holder must read:

**City of Harrisonburg
409 S. Main Street
Harrisonburg, VA 22801**

Such certificates or other evidence of coverage shall be delivered prior to commencing performance under this Permit, and shall contain the express condition that the CITY is to be given written notice of at least thirty (30) days in advance of any cancellation, non-renewal or material change of any insurance policy.

Insurance Requirements

Renters are required to evidence the following Insurance to the City:

<u>Insurance Coverage Type</u>	<u>Limit of Liability Required</u>
Commercial General Liability	Each Occurrence \$1,000,000 Aggregate \$2,000,000

- All insurance policies evidenced to the City shall name the City of Harrisonburg as an Additional Insured and list the date and location of the event.

If Renter does not have insurance, alternatively it may be obtained through a TULIP (Tenant User Liability Insurance Program). Contact Harrisonburg Parks and Recreation for more information.

Internal Use only:

Approved: YES NO

Permit # 27163

Date Received: 3/20/19

Date of Rental: 8/11/19

Date Insurance Submitted: _____

Rental Fee: N/A

Security Deposit: N/A

Date Insurance Approved: _____

Insurance Compliance Documentation is Attached (circle one): **Yes** No

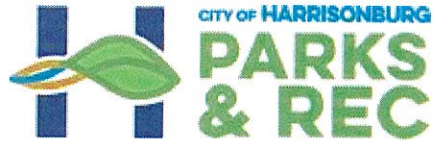
*- Pending a copy psw to usage
3/22/19*

Facility Supervisor: 

Signature

Date

FACILITY SALES RECEIPT



Receipt # **509404**
 Payment Date: 03/22/2019
 Household: 25232

NELLY MORENO SHENK
 110 OLD SOUTH HIGH STREET
 HARRISONBURG VA 22801

Comm Activity Cntr
 305 S. Dogwood Drive
 Harrisonburg VA 22801
 Phone: (540)433-2474 Ext: 2443
www.harrisonburgva.gov/parks-recreation

Reservation Details: Smithland Road, Smithland Pad 1

Reserv. Contact: **Nelly Moreno Shenk**
 Phone Number: **(540)249-1341**
 Reserv. Number: 27163
 Status: Firm
 Purpose: Hispanic Festival
 Anticipated Count: 2500

<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
0.00	0.00	0.00	0.00	0.00

Date(s): Sun @ 5:00am - 8:00pm: 8/11
 Special Questions: Reservation Comments:

Reservation Details: Smithland Road, Smithland Pad 2

Reserv. Contact: **Nelly Moreno Shenk**
 Phone Number: **(540)249-1341**
 Reserv. Number: 27163
 Status: Firm
 Purpose: Hispanic Festival
 Anticipated Count: 2500

<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
0.00	0.00	0.00	0.00	0.00

Date(s): Sun @ 5:00am - 8:00pm: 8/11
 Special Questions: Reservation Comments:

Reservation Details: Smithland Road, Smithland Pad 3

Reserv. Contact: **Nelly Moreno Shenk**
 Phone Number: **(540)249-1341**
 Reserv. Number: 27163
 Status: Firm
 Purpose: Hispanic Festival
 Anticipated Count: 2500

<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
0.00	0.00	0.00	0.00	0.00

Date(s): Sun @ 5:00am - 8:00pm: 8/11
 Special Questions: Reservation Comments:

Reservation Details: Smithland Road, Smithland Pad 4

Reserv. Contact: **Nelly Moreno Shenk**
 Phone Number: **(540)249-1341**
 Reserv. Number: 27163
 Status: Firm
 Purpose: Hispanic Festival
 Anticipated Count: 2500

<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
0.00	0.00	0.00	0.00	0.00

Date(s): Sun @ 5:00am - 8:00pm: 8/11
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