

PARKS REQUEST FORM

CITY OF UVALDE P.O. BOX 799

UVALDE, TX 78802-0799 PHONE: (830) 278-3316

FAX: (830) 278-2234

E-MAIL:					
STREET ADDR	ESS:		MAILING	ADDRESS	:
PHONE: (H)		(W)	(C)		
NATURE OF R	EQUEST:	PUBLIC EVENT	PRIVATE EVENT		
PARK REQUES	STED:	MEMORIAL PARK	JARDIN DE LOS H	EROES	DOWNTOWN PLAZA
DATE OF EVE	NT:	STAF	RT TIME:	EN	D TIME:
FEE SCHEDU					
Private E	vents:				
ELEC	TRICITY (per hour)	\$10.00	Χ	=
Public Ev	ents:				
SETU	P AND T	AKE-DOWN	\$200.00		
CLEA	NUP		\$22.50	X	=
POLIC	CE SECU	RITY (per hour/per o	fficer) \$22.50	X	=
					TOTAL =
City Co	ours may City pa The cle ouncil aut Police s The sta A sign r Provide	The City Manager r that: No damage to the premises thorization is required security is mandatory for the license to sell beer must be posted stating to proof of liability insur	er than 2:00 a.m. with or private commercial nded if: status is provided to the case of the city property of the c	gain; the City Months for the curred do the cuse main the foll holic bevo y-one (21) eer.	Manager; e cleaning fee if it is found uring the use; and ntenance or cleanup lowing conditions:
o Signature		o more than 2 canned	Da	ate	
	For afte	rhours assistance nla	se call police departr	mont at 0	20 279 01/17

and request the on-call park employee.