

Outdoor Facility Application Form
 HRM Community Development - Facility Scheduling
 P.O. Box 1749, Halifax, NS B3J 3A5 (902) 490-7100

Organization Name (if applicable): _____

Contact Name: _____

Address: _____ City: _____ Postal Code: _____

Telephone(Home): _____ Business/Alternate: _____

E-Mail: _____ Fax: _____

NAME OF/TYPE OF EVENT:

Have you booked HRM facilities for this event in previous years? " Yes " No
 If yes, which facilities? _____

Facility Requested: (If unsure, please consult with scheduling staff for recommendations)

Facility	Day	Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Start Date: _____ End Date: _____

Do you require services from Municipal Operations staff prior to, or during, your event? " Yes " No
 If yes, please list: _____

(Please note: there may be additional costs charged to the client for services provided by HRM staff.)

Do you plan to request permission for: **A Beer Garden?** " Yes " No
A Tent? " Yes " No

Do you plan to have any of the following on site during your event:
BOUNCY CASTLES " Yes " No
TENT (S) " Yes " No
OTHER.....Must Specify _____
 " Yes " No

If you have answered 'YES' to the above, **please discuss with staff** to obtain information regarding the appropriate procedures.

****PLEASE NOTE... VEHICLES ARE ONLY PERMITTED ON SITE FOR THE UNLOADING AND LOADING OF EQUIPMENT.****

****CLIENTS/EVENT ORGANIZERS NEED TO BE AWARE THAT IT IS YOUR RESPONSIBILITY TO ARRANGE FOR PORTABLE WASHROOMS FOR YOUR EVENT ON ANY LOCATION THAT DOES NOT CURRENTLY HAVE WASHROOMS ON SITE, AT YOUR EXPENSE.**** If washrooms are available on site and you do require **additional units**, this is also at your expense. **Permission must first be obtained through the Scheduling Office.** Consultation will be made with Municipal Operations staff re installation location, placement, etc.

Yes, I require Portable Washroom(s) " Yes " No Number of Units: _____

Will spectators be charged? " Yes " No If yes, list fee(s): _____

DO YOU REQUIRE ACCESS TO ELECTRICITY? " Yes " No ****Most HRM facilities do not have access to electricity. PLEASE CHECK WITH SCHEDULING STAFF FOR AVAILABILITY at time of request.****

I ACKNOWLEDGE THAT THIS APPLICATION IS ONLY A REQUEST. RENTALS ARE NOT CONFIRMED UNTIL ALL APPLICABLE FEES ARE PAID IN ADVANCE OF USAGE AND A CONTRACT IS SIGNED. **A \$15.00 non refundable application fee must accompany this application form.** ****Please note that under certain circumstances, the option of a payment plan may be available.****

Signature: _____ Date: _____

 Office Use Only:

Staff Receiving: _____ Date: _____