



Office of Recreation pville-recreation@comcast.net www.pleasantville-nj.org

> Phone: (609) 484-3608 Fax: (609) 484-8225

Thank you for choosing Pleasantville Parks & Recreation Facilities. In order to better serve you completely, we ask that you complete the following application for field or property use and attach the following:

- 1. Certificate of Insurance naming the City of Pleasantville additionally insured.
- 2. Check or money order made payable to the City of Pleasantville for necessary fees.
- 3. Copy of Fire Permit (if applicable)
- 4. Copy of Team Roster (if applicable)
- 5. Copy of Map showing designated location for event (obtain a copy from Recreation Department). Also, attach a detailed description of activity or purpose of event at said location.
- 6. Please return application not less than (30) thirty days nor more than (90) ninety days before the event.
- **ALL INFORMATION MUST ACCOMPANY THE COMPLETED APPLICATION FOR APPROVAL.

If application is denied by the City of Pleasantville, a full refund will be applied.

REFUND POLICY

If you or your organization decide to cancel, it must be ten (10) business days prior to your event. An administrative fee of \$50.00 will be applied for processing.

For additional information, you may contact the Recreation Department at 609-484-3608/484-3627 or the City Clerk's office at 609-484-3600

CITY OF PLEASANTVILLE REQUEST FOR USE OF PUBLIC PROPERTY

PUBLIC BALL FIELD		PUBLIC PROPERTY
Portion of field Requested (see	Map)	
Date(s) Requested		
Time(s) Requested		
Contact Person(s)		
Address		
		Work
Name and Address of Insurance	e Carrier:	
Your organization will be requi Pleasantville additionally insure	•	ficate of Insurance naming the City of \$1,000,000.00.
Will there be an admission fee? If yes, what amount?		
Will food, articles, etc., be sold	? Yes No	
What will be done with the pro-	fit?	
******NO ALCOHO	LIC BEVERAGES	ARE PERMITTED*****
Applicant's Signature		Date

FEE SCHEDULE:	
issued. If you decide to cancel; an	als, carnivals. D LEAGUE:
<u>F</u>	OR DEPARTMENTAL USE ONLY
The following to be compaperwork attached.	leted and signed by issuing department head with all necessary
1. Rental fee	Paid? Yes No
2. Required certificate of	Insurance attached? Yes No
3. Is security required? Y	es No
4. If an outside tent is rec (Tents, chairs, and tables a	quested, has the Fire Department issued a permit? Yes No are renter's responsibility)
All requirements have bee	en met for use of this facility.
City Clerk	Superintendent of Recreation
BECOMES A VALID P	GNATURES MUST BE OBTAINED BEFORE THIS ERMIT. PLEASE RETURN COMPLETED FORM TO THINTENDENT OF RECREATION'S OFFICE FOR NAL APPROVAL.
1. Public Works Superint	tendent
2. Police Chief	
3. Fire Chief	
4. City Administrator	
5. Mayor	