



DATE: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

## EVENT USE APPLICATION

### Flint Downtown Development Authority

502 Church Street

Flint, MI 48502

Phone: (810) 767-2297

**Daily Rates:** *Flat lot* - \$1000 *Rutherford Ramp top deck* - \$1000 *Riverbank Park* - \$500

Buckham Alley -\$50

Brush Alley-\$50

There will be a \$25 Application fee

**ALL EVENTS MUST BE COMPLETED BY 10:00 PM SHARP AND IF NOT THE DDA WILL CHARGE (i) \$200.00 IN ADDITION TO ALL OTHER CHARGES IF THE EVENT IS NOT COMPLETED BY 11:00 PM, AND (ii) \$200 FOR EACH ADDITIONAL FIVE MINUTES IF AN EVENT CONTINUES AFTER 11:05 PM**

FACILITY/ LOCATION: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PURPOSE \_\_\_\_\_

#### **DATES(S) / FACILITIES REQUESTED**

FROM/TO: \_\_\_\_\_ STARTING/CLOSING TIME: \_\_\_\_\_

# OF PEOPLE EXPECTED: \_\_\_\_\_

APPROX. AGE OF PEOPLE EXPECTED: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_ ORGANIZATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE(S): \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_



Do you represent a non-profit organization? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Is this event open to the public? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Does this event involve fundraising or revenue generated activities? Yes: \_\_\_\_\_

No: \_\_\_\_\_

Will donations be solicited? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Will food be served at this event? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Will alcohol be served at this event? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**The Downtown Development Authority requires you to obtain personal liability insurance for the event.**

**For renting the DDA Flat Lot or the Rutherford Ramp you are required to add "Flint DDA" as an added insured and give copies of all such policies.**

**For renting Riverbank Park, you are required to name the "Flint DDA" and The City of Flint as additional insureds and give copies of all such policies. City of Flint needs the Following languages as "added Insured":**

**"The City of Flint, and including all elected and appointed officials, all employees and volunteers, all boards, commissions and/or authorities and their board members, employees and volunteers"**

**For renting Towers Park, you are also required to name: "The Flint DDA" and "Uptown Reinvestment Corporation, Inc" as an additional insured and give a copy of such policy.**

**\*For alcohol at any event in any park, you need to send a copy of your alcohol insurance policy.**

**I acknowledge that I have received the Facility Use Policy and shall comply with all terms and conditions of the Facility Use Policy, and to all regulations, ordinances, and other laws of the DDA, City of Flint, State of Michigan and/or United States insofar as they may apply. Failure to comply with the terms and conditions of the Use Policy shall be a violation. If, upon expiration or termination of the reservation, it is determined that an applicant has not complied with the terms and conditions of the policy, or has violated any law, ordinance, statute or rule, then the following rules shall apply:**

**(i) The applicant, together with his or her agents and employees who violated such terms and conditions or provisions of law, ordinance, statute, or rule, shall be jointly and**



severally liable for any additional sum necessary to correct or compensate the DDA and/or the City of Flint for such damages; and

(ii) Neither forfeiture of any security nor payment nor recovery for such damages shall in any way relieve the applicant of civil or criminal liability arising from the violation of any law, ordinance, or rule.

I agree to be responsible for the conduct of our group, for damages to the Facility I am using and to leave the Facility in the condition it was found. I also acknowledge that I have received and have read the DDA's Facility Use Policy and will abide by said policy. I understand that failure to comply with any of these obligations may result in cancellation of my reservation(s) and the future facility use privileges. To the fullest extent as permitted by law, I (individually and on behalf of the Organization) hereby agree to waive any and all claims against the DDA and/or City of Flint whether known or unknown related to the application for and/or use of the Facility and to defend, indemnify and hold harmless the DDA and/or City of Flint from any and all claims made against either the DDA and/or City of Flint related to use of the Facility if this application is approved.

Further, I certify that I am authorized to act on behalf of the Organization listed above and have provided organizational documents pertaining to the Organization to the DDA.

I acknowledge and agree that this Facility Use Request Form is an application/request only and that it is being made subject to the DDA's written approve and may be denied, and for that reason I acknowledge and agree that if I expend any funds on planning, advertising or any other thing prior to receiving written approve of the use of the facility from the DDA, that I do so at my risk and waive any and all claims against the DDA.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**- For City of Flint Downtown Development Authority Use Only -**

Availability of facility on date(s) requested: \_\_\_\_\_

Proof of insurance (insurer and insured information): \_\_\_\_\_

General Liability: \_\_\_\_\_

Alcohol Liability: \_\_\_\_\_

Casualty: \_\_\_\_\_

Additional Insured: \_\_\_\_\_

Proof of non-profit status: \_\_\_\_\_

Equipment required availability: \_\_\_\_\_

License(s) needed for event: \_\_\_\_\_

Solicitation: \_\_\_\_\_

Alcohol: \_\_\_\_\_

**- Requirements For Space Rental -**

Event Application: \_\_\_\_\_

Security: \_\_\_\_\_

Sanitation Plan: \_\_\_\_\_

Insurance Policy: \_\_\_\_\_

COVID Restrictions: \_\_\_\_\_

**City of Flint Downtown Development Authority:**

By: \_\_\_\_\_

Amount paid: \_\_\_\_\_

Paid on: \_\_\_\_\_