



# APPLICATION FOR WAIVER

## BREVARD COUNTY BOARD OF COUNTY COMMISSIONERS PARKS & RECREATION DEPARTMENT

AREA:  NORTH  CENTRAL-MAINLAND  CENTRAL-MI/BCHS  SOUTH  CAMPGROUNDS

Name \_\_\_\_\_ Representing \_\_\_\_\_  
(INDIVIDUAL, ORGANIZATION, GROUP, COMPANY)

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

DESCRIPTION OF ACTIVITY: What \_\_\_\_\_ Where \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ Estimated Attendance \_\_\_\_\_ Admission Charge \_\_\_\_\_

Purpose of Activity \_\_\_\_\_

Brief description of organization, its purposes, goals and pertinent information \_\_\_\_\_

Non-Profit?  Yes  No Does the organization assume responsibility for supervision? \_\_\_\_\_

Article IV, Festivals

Live or amplified music on park facility as a primary function.

Article V

Section 18-104 (2) Alcoholic Beverages—To allow possession/sale/donation of alcoholic beverages.

Section 18-106 (8) Waiver of general comprehensive liability insurance and in lieu, provide hold harmless affidavit. Field reservation deposit for softball tournaments must be paid before submitting request for waiver of insurance.

Sections 18-2 and 18-103 Waiver of facility use fees per Policy BCC-39.

Appeal Process

1. The applicant may appeal the denied fee or softball insurance waiver to the Board of County Commissioners.
2. A written appeal request must be submitted to the appropriate Parks Operations Manager or designee within five (5) days after notification of the denied waiver.
3. The Parks Operations Manager or designee must then request placement of the appeal on the Board of County Commissioner's Agenda for consideration.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

(FEE WAIVER REQUESTS MUST BE SIGNED BY AN OFFICER OF THE ORGANIZATION.)

..... DEPARTMENT USE ONLY .....

Criteria for Waiver of Fees: (Check appropriate box.)

Activities which are sponsored and co-sponsored by Brevard County for a public purpose.

Activities sponsored by other governmental agencies.

Activities sponsored by groups, organizations or individuals where proceeds are given to charitable causes, organizations, individuals or Brevard County facilities or programs.

Activities sponsored by organizations to which Brevard County is a member.

Comments: \_\_\_\_\_

Fee Waiver Request:  Recommended  Not Recommended Other Requests \_\_\_\_\_

Superintendent/Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Fee Waiver Request:  Recommended  Not Recommended Other Requests \_\_\_\_\_

Parks Operations Manager \_\_\_\_\_ Date \_\_\_\_\_

Fee Waiver Request:  Recommended  Not Recommended Other Requests \_\_\_\_\_

Parks & Recreation Department Director \_\_\_\_\_ Date \_\_\_\_\_

Waiver of General Comprehensive Liability Insurance for Softball Tournaments:  Approved  Not Approved

Parks & Recreation Department Director/Designee \_\_\_\_\_ Date \_\_\_\_\_

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