



Parks & Recreation

Special Use Authorization Permit

City of Winter Park
Parks & Recreation
401 Park Ave S.
Winter Park, FL 32789
(P)407-599-3334
(F)407-599-3454
www.cityofwinterpark.org

Applicant Information

Name:

Phone #:

Address:

City:

Zip/Postal Code:

Will Equipment be used? Yes No

Additional Equipment Info.

What type:

Vendor Name:

Vendor Phone #:

Vendor Address:

City:

Zip/Postal Code:

Permit Use Information

Park/Facility:

Date of Use:

Type of Use:

Time of Use:

Attendance:

Insurance Information

* A certificate of insurance is required having the City listed as a carrier, \$500,000 per/occ, \$1,000,000 aggregate.

Proof of Insurance Submitted: Yes No

Additional Information:

I agree to hold the City of Winter Park, the Parks and Recreation Department, it's officers and employees harmless in the event of an accident.

Signature

Date

Department Authorization