Parks & Recreation Department
SeaTac Community Center
13735 24th Ave. S., SeaTac, WA 98168
206.973.4680

Angle Lake Exclusive Park Permit Application

Organization _____ Applicant Name _____
Address _____ City _____ State _____ Zip _____
Applicant Phone _____ Email _____
Person in Charge of Activity (if different from Applicant) _____
Contact Phone Number(s) _____ Email _____
Date(s) Requested _____ Time Requested (including set-up and take-down) _____
Estimated Attendance _____ Is the event open to the public? ❑ Yes ❑ No
Will Admission or any other fees be collected either before and/or during the event? ❑ Yes ❑ No
If yes, list fee(s): _____
Any attachments? ❑ Yes ❑ No If yes, please describe _____
Vendors: ❑ Yes ❑ No
Event Description (Please be specific) (Please use separate sheet if needed)

_____
_____
_____
_____

Permit Requirements

1. **Proof of Insurance** - Applicants must provide proof of insurance for the event. **See page 2** for insurance requirements.
2. **Completion of Permit Application** - Applicants must complete and sign Exclusive Use Park Permit Application to proceed with request. Application must be submitted at least 90 days in advance of event.
3. **Rental Fee/Deposit** -
   Application Fee: $200 - Due upon approval of permit application. Non-Refundable.
   Deposit: 50% of permit cost (refundable up to 30 days in advance)
   Rates: Please see attached special event application process guide for rate descriptions **SpecialEvent_ProcessGuide.pdf**

Rental fee is due 45 days prior to event. Additional fees may apply based on request and venue impacts.

If not submitting electronically, you may return application to facilityrental@seatacwa.gov, or to the address above.

AGREEMENT TO ABIDE BY RULES AND REGULATIONS

In the event the applicant is a corporation, partnership, association, club or group, the person signing this application for such entity represents to the City that he/she has full authority to sign such contract and, in the event that he/she is not so authorized that he/she will be personally liable for the faithful performance of this agreement.

By signing this application, the applicant acknowledges that they have read all the rules and regulations on this form for use of the City of SeaTac parks. Furthermore, the applicant understands and plans for the group they represent to abide by these rules and regulations. (See reverse.)

ASSUMPTION OF LIABILITY: AGREEMENT TO HOLD HARMLESS

The undersigned hereby agrees to indemnify and hold City of SeaTac, its elected official, officers, employees, agents and volunteers harmless from any and all claims, demands, losses, actions and liabilities (including costs and all attorney fees) to or by any and all persons and entities including, without limitations, their respective agents, licenses and representatives, arising from, resulting from, or connected with the use of the premises, or from any error or omission of the undersigned, its partner, shareholder, officer, agents, employees, invitees, volunteer, or by the breach of this agreement, unless such injury or damage is caused by the sole negligence of the City of SeaTac.

_____ _____
Applicant's Signature Date

INSURANCE

All applicants must provide proof of insurance in the form of a Certificate of Insurance, which covers their full period of use. The insurance must provide a general liability policy with minimum coverage of $2,000,000 per occurrence; this policy must also name the City of SeaTac as additional insured (additional insurance requirements may be required based on event). ___(initial)

FEES

The deposit must be paid at the time the application is approved. Depending on the event, up to a fifty percent deposit will be required. The applicant shall be responsible for the expenses incurred by the City in correcting; cleaning, repairing, or replacing any facilities or property of the City damaged in connection with the activity for which the park was rented, regardless of who caused the damage. Payment for such damages shall be deducted from the deposit; any additional amount shall be paid by the applicant to the City within thirty (30) days after receipt of the bill for the damage. The deposit is refundable if the park is left in the same condition. Rental fee is due no less than 21 days prior to event.
_____(initial)

CANCELLATION/NON-PERFORMANCE

If applicant fails to provide at least 21 days written notice of cancellation, applicant forfeits their deposit and rental fee in full. Cancellations need to be in writing to the Parks Operations Supervisor. _____(initial)

ALCOHOL POLICY

Alcoholic beverages are prohibited in all City parks. The applicant understands and agrees to abide by this policy and to uphold the laws of the State of Washington. _____(initial)

OPERATION OF PARK FACILITY

This permit application request is for the entire use of Angle Lake Park (**please review page 4 for list of use exemptions**). Applicant agrees to use only the designated area(s) approved on this application for the specified use. The applicant will be responsible for removal of all items brought to the event. _____(initial)

APPLICATION PROCESS PACKET

I have read and understand all requirements within the Application Process Packet. I understand that my application is subject to review and a criteria based scoring system will be utilized to determine if application is accepted. _____(initial)

NON-DISCRIMINATION POLICY

The City of SeaTac will ensure that all persons be entitled to the full and equal enjoyment of the goods, services, facilities, privileges, advantages, and accommodations of any place of public accommodation, without discrimination on the ground of race, color, religion, or national origin. Inquiries concerning the Americans With Disabilities Act of 1990, and requests for reasonable accommodation should be directed to City Hall 206.973.4800. Mail in inquiries should be directed to: City of SeaTac, Human Resources Department, 4800 S. 188th St., SeaTac, WA 98188. _____(initial)

FOR OFFICE USE

Status of Application ❑ Approved ❑ Denied

_____ _____
Staff Signature/Title *Date*

❑ **Certificate of Insurance** Date Received_____

❑ **Deposit** Amount Due $_____ Date Due_____ Date Paid_____

❑ **Rental Fee** Amount Due $_____ Date Due_____ Date Paid_____

❑ **Return of Deposit** Amount Refunded $_____ Date Processed _____ Staff Initials_____