



# FACILITY USE PERMIT APPLICATION COUNTY OF ACCOMACK

## To be completed by Individual, Group or Organization:

- Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No: \_\_\_\_\_  
Email: \_\_\_\_\_
- Facility for which application is being made: \_\_\_\_\_
- Dates and Times Requested: \_\_\_\_\_
- Purpose for facility use: \_\_\_\_\_
- Anticipated Total Attendance: \_\_\_\_\_
- Will admission or a participation fee(s) be charged to attend/participate in this event/activity: \_\_\_\_\_  
If yes, amount of the admission fee(s), participation fee or donation being requested: \_\_\_\_\_  
If yes, please provide further event details.
- County of Accomack Equipment to be used: \_\_\_\_\_
- Other Personal Equipment being used: \_\_\_\_\_
- Will outside vendors be utilized:  Yes  No  
If yes, please provide a list of all vendors for this event. Copies of a County of Accomack Business License and Certificate of Insurance listing the County of Accomack as additional insured **will be required from each vendor five (5) days prior to the event.** Accomack County Health Department Permits may apply.

I certify that the proposed and planned program or meeting will be conducted on a completely non-discriminatory basis and that no person will be denied admission or attendance on the basis of race, color, sex, national origin, marital status, age, religion, political affiliation or disability. I understand the regulations governing the use of the County of Accomack facilities and hereby assume full responsibility for meeting and complying with all regulations, including, if requested, providing liability insurance coverage. Charges for rental, custodial and/or supervisory services, and the use of special equipment will be paid within five (5) days of the event. No alcoholic beverages, drugs or firearms are allowed on County of Accomack properties. The facility shall be left in clean condition with all trash removed. Additional fees will apply if cleaning or trash removal is required after your use.

User agrees to indemnify and hold the County of Accomack, its officers, agents and employees harmless from any and all liability, damages, actions, claims, demands, expense judgements, fees and costs of whatever kind or character arising from, by reason of, or in connection with the use of the facilities described herein. It is the intention of the parties that the County of Accomack, its officers, agents and employees shall not be responsible for injury, damage, liability, loss or expense resulting to the user and those it brings onto the premises. User expressly assumes full responsibility for any and all damages or injuries, which may result to any person or property by reason of or in connection with the use of the facilities pursuant to this agreement, and agrees to pay the County for all damages caused to facilities from user's activities.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicable Law and Courts:** The foregoing agreement shall be governed in all respects by the laws of the Commonwealth of Virginia, and any litigation with respect thereto shall be brought in the Courts of Accomack County.