



City of Belleair Beach
Beach/Park Permit Agreement

Name _____ Email: _____

Street Address _____ City/State/Zip _____

Phone (home) _____ Cell _____

Permit Location: _____

Scheduled Event: _____

Date(s) _____ Time Requested: _____

The renter agrees that:

Permit fee of \$100.00 plus a non-refundable cleaning fee of \$100.00. A Damage Deposit of \$200.00, payable by check only, made payable to the City of Belleair Beach. The damage deposit check will be processed and returned following the rental if the area is left in good and clean condition and no damages incurred. Any check payable to the City of Belleair Beach that is returned for "insufficient funds" will result in the assessment of a fifty (\$50.00) dollar service fee.

- Facilities used must be left in good and clean condition. If these conditions are not met to the satisfaction of the City staff, the deposit will be forfeited.
No alcohol is permitted in the City of Belleair Beach Parks.
Reservation fee is for no other park amenity.
Reservations can be rescheduled or cancelled, with a full refund, no later than 30 days prior to the reservation date.
Full payment must be received at the time the reservation is made.
Do you have homeowners or other liability insurance for this event? Yes No

Permittee must provide a copy of the Endorsement page of a policy naming the City of Belleair Beach as an Additional Insured.

RELEASE OF LIABILITY AGREEMENT

For and in consideration of the limited use of the City's facilities granted herein, and to the extent permitted by law, the Permittee agrees to release and hold the City of Belleair Beach, its elected officials and employees, harmless from and against whatsoever, which may arise as result of the Permittee's use of the land and/or improvements thereupon for the event described in the Permittee's application. Nothing contained herein shall be construed to waive or modify the provisions of F.S. 768.28 as same is applicable to the City.

I understand that the City of Belleair Beach has the right to assess additional charges if facility, equipment or any privilege is abused. I also understand that my group will be asked to vacate the premises immediately if any conduct is deemed unsatisfactory by a law enforcement or code enforcement officer resulting in all monies paid to be retained as liquidated damages and not as a penalty.

Signature of Permittee _____ Date _____

For Staff Use Only
Permit Fee \$ _____ Non-Refundable Cleaning Fee \$ _____ Sales Tax for both Fees 7% \$ _____
Damage Deposit CHECKS ONLY \$ _____ TOTAL DUE \$ _____ Paid in Full _____ (Staff initials)
Liability Insurance with City as Additional Insured RECEIVED Date _____ Staff Initials _____
Date _____ City Representative _____