Revised 8-16-2022

Permit must be submitted at least 30 days before AN event date.

Permit Number		

CITY OF GRAYLING MULTI-USE PERMIT

Please check below for the type o	f permit being requested	(mark all that apply): Use black	k or blue ink		
[] Use of City Streets [] Use of City Property [] Reservation for Use of City Park Pavillion					
[] Nature Center [] Other					
Name of Organization:					
Address:					
Contact Person:		Telephone Number:			
Alternate Contact Person:		Alternate Telephone Numb	Alternate Telephone Number:		
Date(s) requested:		Time(s) requested / Hours	of Operation:		
Alternate Date(s) / Time(s) in case of cancellation due to inclement weater or other unforeseen events:					
Location(s) of Event (attach a separate sh	eet if necessary):				
Purpose / Type of Event (attach a separat	e sheet if necessary):				
Will the organization be doing any cooking	g? [] Yes [] No V	ill there be any items offered for sale?	[]Yes []No		
What will be used for a power supply, if anything?					
What chemicals will be on location, if any	?				
What will parking arrangements be? (attac		rv)			
Trial IIII parting arrangement 201 (and	a coparato cricot, ii ricocco	-77			
Do you have any angold needs or request	o for this event? [] Ven [1 No. If You places explain (attach a	congrate cheet if page 2001):		
Do you have any special needs or request	s for this event? [] res [] No If Yes, please explain (attach a	separate sheet if necessay).		
I have read and agree that we will	abide by all of the condi-	ions that apply.			
Signature:		Date:			
	OFFICE USE C	NLY			
These special conditions apply	to applicant as marked	(as well as all noted on the re	everse side):		
[] Supply a Certificate of insurance indicating the City of Grayling as a co-insured party.					
[] Supply a \$50.00 security deposit, when required. (101-000-677.000), if the attached list of items are not cleaned your security deposit possibly could be reduced or not refunded					
[] Keep a copy of the approved request at the function.					
[] No Alcohol Allowed.					
[] City Park closes at 10:00 PM, unless otherwise requested and approved.					
[] The City reserves the right to cancel this event due to unsafe conditions.					
[] Do not Block Fire Hydrants.					
[] Maintain 18 ft. safety lanes for emergengy equipment / vehicles.[] Obtain a copy of City Park Rules					

OFFICE USE ONLY

Conditions / Advisory Comments	s:			
Receipting Information	Application Received By:	Date:		
[] Received Certificate of Insurance	Employee Initials:	Date:		
[] Received Security Deposit ck#	Employee Initials:	Date:		
[] Returned Security Deposit ck#	Employee Initials:	Date:		
Application Review:				
[] Request Approved				
[] Request Denied Reason:				
Signature:		Date:		
Erich Podjaske, City Manage	:r			
Route Copy To:				
[] Police Department				
[] Fire Department				
[] DPW				
[] Other:				
CUSTODIAN ONLY-CHECK LIST	Date Checker Date Checker Date	te Checkel Date Checkel Date Checked		
[] Furniture back in same orienta	ation	JANITOR NOTES		
[] Tables, Chairs, Counter Top & Coffee Pot Cleaned				
[] Projection Screen Cleaned and	d put up			
[] Restrooms Clean of trash				
[] Restrooms Clean (Nov 1 - Mar	rch 31st nature center use only)			
[] Thermostat temperature to 60	degrees (winter) 70 degrees (summe	er)		
[] Trash is removed & set by doc	or and new bags in trash bins			
[] Other:				

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