



EQUIPMENT USE PERMIT

Lake Havasu City Aquatic/Recreation Division
 100 Park Avenue • Lake Havasu City, AZ 86403
 Phone: (928) 453-8686 FAX : (928) 453-1133

DATE RECEIVED:

Applicant: _____
 (Group Name) _____ Contact Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ Cell: _____ Email: _____

City Use Govt Agency Private Commercial Non-Profit Non-Profit Fundraiser

Date(s) of Use: _____ Start/End Time: _____

Description of Use: _____

Please check the items you would like to request, enter the amount of each you would like on the line provided

			Govt Agency	Private Use	Comm- ercial	Non- Profit	TOTAL
<input type="checkbox"/> Rectangle Tables	X _____ X	\$4	\$5	\$6	\$3	_____	
		each	each	each	each		
<input type="checkbox"/> Folding Chairs	X _____ X	\$1	\$1	\$1	\$1	_____	
		each	each	each	each		
<input type="checkbox"/> 10' White Fencing	X _____ X	\$2	\$3	\$4	\$2	_____	
		section	section	section	section		
<input type="checkbox"/> 12' Metal Fencing	X _____ X	\$7	\$9	\$11	\$5	_____	
		section	section	section	section		
<input type="checkbox"/> Inflatables (two-hour minimum)	X _____ X	\$38	\$50	\$60	\$25	_____	
		per hour	per hour	per hour	per hour		

Applicant assumes all risks and liability associated with the use of City equipment. Applicant agrees to indemnify, defend, save, and hold harmless Lake Havasu City its departments, agencies, boards, commissions, officers, officials, agents, volunteers, and employees from and against all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorney's fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), of Applicant or any of its owners, officers, directors, agents, volunteers, employees, or contractors, arising out of or related to Applicant's occupancy or use of City facilities, property, or equipment, regardless of whether or not the Claims are caused in whole or in part by a party indemnified hereunder. It is the specific intention of the parties that the City shall, in all instances, be indemnified by Applicant from and against all claims. It is agreed the Applicant will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable.

Applicant will be billed for any equipment missing or returned damaged

Applicant's Signature: _____ Date: _____

FOR OFFICE USE ONLY

Total Due: _____ Cash/Check/Charge: _____ Receipt #: _____

Approved by: _____ Date: _____