



City of Dover

Application and Permit Fields, Park Areas, Pavilions



Applicant (Permittee) Information All information must be answered prior to consideration by the City of Dover.

Today's Date: _____
 Contact Person: _____ Organization: _____
 Complete Mailing Address: _____

 Primary Phone: _____ Secondary Phone: _____ Email: _____

Event Information All information must be answered prior to consideration by the City of Dover.

Date of Event: _____ Purpose: _____
 Circle one: Park Area Park Pavilion Multipurpose / Softball Field Stage Rental

Parks and Recreation Department to complete this information

Security Deposit: _____ Rental Payment Due Date & Invoice #: _____
 Insurance Required: _____ Provided: _____ Field Lights Fee: \$40 First Hour / \$20 1/2 hr. x ____ = _____

15 days are required to process permit application. all applications are subject to review by the City of Dover Parks and Recreation Department. E-mail application to Narnold@dover.de.us

Fields Request

Park Area/ Pavilion Request

Stage Rental

Field(s) Requested: _____	Park Area or Pavilion Requested: _____	Location of Stage Requested, \$300 fee due 2 weeks prior to event. (Please provide a detailed map.) _____
Start Time: _____	Start Time: _____	Start Time: _____
End Time: _____	End Time: _____	End Time: _____
Number of people attending: _____	Number of people attending: _____	Comments: _____
Field Lights Requested Hours: _____	Comments: _____	_____
Comments: _____	_____	

Be sure to read and sign the back of this form. Without your signature, this form will not be processed by the City of Dover Parks & Recreation Department.

****Excessive Cleanup/Repairs****

Should your activity cause excess cleaning or repair to the Permitted area, as determined by the City of Dover, you will be responsible for all fees incurred for cleanup and repair.

Such fees will be charged directly to the contact person/organization on this application.

Please call our office at (302) 674-7541 for questions.

Parks & Recreation Rules & Regulations

General Rules & Regulations for all City of Dover Parks facilities and property.

1. No admission fees, sales or fundraising activities are permitted without prior approval from the Parks & Recreation Department.
2. No soliciting, conducting business or providing services without written approval.
3. The Permittee, employees, agents, or contractors, unless specifically exempted or otherwise noted shall observe rules and regulations of the Division of Parks and Division of Recreation. NO ALCOHOL IS PERMITTED AT ANY CITY OF DOVER PARK
4. No fires of any kind except for grills or approved cooking areas, this will need to be approved by the Parks & Recreation Department.
5. No unauthorized vendors permitted.
6. No disorderly, unsafe or disruptive conduct.
7. Permit holder must be present during the entire rental period. Permit must be available upon request by staff or law enforcement.
8. All trash must be disposed of in provided receptacles.
9. Parking is permitted in designated areas only. Violators may be ticketed or towed at owner's expense.
10. No parking on ANY GRASS
11. Park hours are from dawn until dusk, daily.
12. The permit holder is responsible for any damage to City properties. The City of Dover is not responsible for lost, stolen or damaged items.
13. The Parks & Recreation Department reserves the right to cancel or revoke any permit.
14. Deposits are due with application; remainder of balance is due no less than 2 weeks prior to event start date.

Multipurpose and Softball Field Rentals

1. Camp and tournament fees are refundable only when cancellations are made no less than two weeks prior to the first date scheduled.
2. Field lights are available for softball tournaments (only) at an additional fee. Field lights will not be permitted for camps or team practices.
3. The City of Dover reserves the right to require insurance for special events, tournaments, and facility rentals.
4. All the General Rules & Regulations apply to these fields.

Pavilions - Dover Park (2), Silver Lake Park (2), and Schutte Park (1)

1. Cancellation of a reservation for a reason other than a natural cause or at the discretion of the Parks & Recreation Department will carry a \$25.00 service fee if the cancellation is less than seven (7) days in advance.
2. Full payment due with application when reserving a pavilion.
3. All the General Rules & Regulations apply to these pavilions.

Stage Rentals

1. To reserve the City of Dover stage, a permit must be completed with a detailed map showing where the stage is being placed. The stage fee is \$300 per day and that must be paid 2 weeks prior to your scheduled event.
2. Stage dimensions are Width 16' Length 24' Deck Height 48"
3. Stage use must follow the approved reservation time and is limited to performances, presentations and approved activities only.
4. Permit holder is responsible for cleanup, and any damage to the stage or surrounding areas.

Liability and Responsibility of Applicant

By signing this permit, I the permittee, accept the privilege of use of the City of Dover property on behalf of all persons in the group with me and I understand that this permit may be revoked at any time for violation of the rules and regulations and that I may be denied further permission to use City property if violation of any of the rules and regulations by me or any person in my group. I further acknowledge that the permittee shall be solely responsible for any damage, trash cleanup, police costs, maintenance repair fees, etc. to the premises if so determined by the City of Dover Parks & Recreation Department. We accept the premises in the condition as found and we will leave the area in the same condition. We make no claim against the City for defective condition of the premises or for any other matter.

Applicant Signature

Date

APPROVED _____ **DENIED** _____

Approved By: _____

Date: _____



City of Dover



Parks & Recreation Department
Fields, Parks, Pavilion & Stage Rental Rates

Schutte Park Multipurpose & Softball Field Rates

Tournaments

Fees

One Field Area	\$150.00 - Per Day
Two Field Areas	\$200.00- Per Day
Three Field Areas	\$250.00- Per Day
Four Field Areas	\$300.00- Per Day

Lining of fields is available for an additional \$25.00 per field.

If interested, please contact the Recreation Office at (302) 736-7050 or e-mail Narnold@dover.de.us

Practices

Fees

One Field Area	\$25.00 - Per day
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Field lights are available for tournaments (only) for an additional fee of \$40 for the first hour of usage and \$20 for each 1/2 hour after. (Not available for softball practices.)

Stage Rental Rates

\$300.00 Per Day

Our stage is only used on City owned properties!

Park Pavilion Rates

Description

Pavilion Fee

Available for rental daily: 7 a.m. - Dusk \$ 50.00 - Day Per Pavilion

Pavilion Locations

Dover Park - #1 Playground Pavilion #2 Woods Pavilion

Silver Lake Park - #1 Beach Pavilion #2 Woods Pavilion

Schutte Park - #1 Playground

Please refer to back of this page for a list of Rules and Regulations. Any violation of these rules may result in the City of Dover revoking your Permit and the loss of your Permit Fee(s). For further information, please call the City of Dover Parks & Recreation Department at (302) 674-7541.

City of Dover Parks & Recreation
Highlighted Park Rules & Regulations

These in addition to the Dover City Municipal Code; Section 74 the following rules apply:

- NOTE:**
- *No Bands, DJ's, or alcohol permitted in city parks or facilities
 - *No loud music
 - *No parking on the grass
 - *No inflatables; Moon Bounces, etc.
 - *Balloon releases in Delaware are illegal.
 - *Electric is not provided at the pavilions or the parks.



15 Loockerman Plaza
Dover, DE 19901

Phone: (302) 736-7010
Fax: (302) 736-4217

APPENDIX C

Insurance Requirements

The City of Dover requires insurance for special events, tournaments, facility rentals, etc. prior to the approval of permit applications a certificate of liability Insurance must be provided with the application or within the timeframe granted by the city. All COI's must be date specific to your event(s).

Insurance Limits must meet the following minimum amounts:

General Liability

Each Occurrence	\$1,000,000
Damage to Rented Premises	\$100,000
Med Exp (any one person)	\$5,000
Personal &: Adv Injury	\$1,000,000
General Aggregate	\$3,000,000
Products - Comp/Op AGG	\$3,000,000

Automobile Liability

Any &: Hired Autos	\$1,000,000
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Umbrella Liability

Each Occurrence	\$1,000,000
Aggregate	\$1,000,000

The insurance policy shall include an endorsement naming the City of Dover as "Additional Insureds" as follows: ABC Company and any other party whom the Permit Holder is required by contract, permit, and/or agreement to name the City of Dover as an Additional Insured; are Additional Insureds on a primary noncontributory basis, including coverage for their sole negligence, for ongoing and completed operations. Each of the respective Additional Insureds' Owners, Shareholders, Partners, Members, Representatives and Agents are also included as Additional Insureds.

The City of Dover may not recommend an insurance company; however pertinent information may be located online. Information on obtaining insurance such as providers, costs, etc. is available at these websites.

www.theeventhelper.com
www.esportinsurance.com
www.specialeventinsurance.com

Other websites and local insurance agencies may also be of assistance. Don't forget to check with your own insurance provider for auto/home/property, etc. as they may be able to provide event insurance also.

Can be mailed to: Senclivia email to: JDill@dover.de.us

City Manager's Office
c/o Jeff Dill
15 Loockerman Plaza
Dover, DE 19901

If you have been notified that you need insurance or have questions pertaining to this information, please feel free to contact Jeff Dill at 302-678-4858.

THIS IS AN EXAMPLE

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
EXAMPLE ONLY

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER This is where the name of the company will show	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">CONTACT NAME: REQUIRED</td> </tr> <tr> <td>PHONE (A/C, No, Ext): REQUIRED</td> <td>FAX (A/C, No):</td> </tr> <tr> <td colspan="2">E-MAIL ADDRESS:</td> </tr> <tr> <td colspan="2" style="text-align: center;">INSURER(S) AFFORDING COVERAGE</td> </tr> <tr> <td>INSURER A: REQUIRED</td> <td style="text-align: right;">NAIC #</td> </tr> <tr> <td colspan="2">REQUIRED</td> </tr> </table>	CONTACT NAME: REQUIRED		PHONE (A/C, No, Ext): REQUIRED	FAX (A/C, No):	E-MAIL ADDRESS:		INSURER(S) AFFORDING COVERAGE		INSURER A: REQUIRED	NAIC #	REQUIRED	
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INSURER A: REQUIRED	NAIC #												
REQUIRED													
INSURED Company/ Entity that is being insured	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>INSURER B:</td><td></td></tr> <tr><td>INSURER C:</td><td></td></tr> <tr><td>INSURER D:</td><td></td></tr> <tr><td>INSURER E:</td><td></td></tr> <tr><td>INSURER F:</td><td></td></tr> </table>	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:			
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INSURER D:													
INSURER E:													
INSURER F:													

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Liquor Liability 0XVW EH DGGHG LI D FRKROLV LQFO GHG GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PER-LOC <input type="checkbox"/> JEL I OTHER:	X		REQUIRED	REQUIRED	REQUIRED	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 00,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Liquor \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			IF IT IS REQUIRED FOR YOUR PERMIT	REQUIRED	REQUIRED	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			REQUIRED	REQUIRED	REQUIRED	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below <input type="checkbox"/> N / A						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Property			REQUIRED	REQUIRED	REQUIRED	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Additional Remarks Schedule, may be attached if more space is required)

Event - Name of Event and the Date the following must also be included

"City of Dover is an additional insured as respect to the liability arising out of the activities or operations of the named insured in relationship with the City of Dover, Waiver of Subrogation."

CERTIFICATE HOLDER

CANCELLATION

<p style="color: red; font-weight: bold;">City of Dover 15 Loockerman Plaza Dover, DE 19901</p>	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p style="color: blue; font-weight: bold; text-align: center;">THIS IS AN EXAMPLE ONLY</p>
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