

Home Place Metropolitan District
Special Event Permit Application

Return application to: Home Place Metropolitan District, c/o Advance HOA, Management,
P.O. Box 3730390, Denver, CO 80237, Phone: 303-482-2213

Make checks payable to: Home Place Metropolitan District

Applicant Information:

Name: _____ Phone: _____
Address: _____ City/Zip: _____
E-mail: _____

Special Event Information:

Park or Park Area Requested: _____

Date(s): _____

Time(s) including set up and clean up: _____ a.m./p.m. to _____ a.m./p.m.

Type of event: _____

Estimated Number of People Expected to Attend: _____

Will alcohol be present? _____

INDEMNIFICATION/WAIVER OF LIABILITY: The Applicant, by his/her signature below, agrees to comply with all Rules of the Home Place Metropolitan District (the “**District**”) related to the use of the location listed above. Further, the Applicant, and his/her successors and assigns, will defend, indemnify and hold harmless the District, the District’s staff, employees, consultants, licensees, invitees, agents, successors, and assigns from any and all loss, claims, liability, damages, and costs, including, without limiting the generality of the foregoing, court costs and attorneys’ fees, caused by, resulting from, or in any way arising out of the use of the District’s property by the Applicant, its licensees, invitees, agents, contractors, subcontractors, employees, successors, and assigns pursuant to the Special Event Permit issued hereunder.

Signed: _____ Date: _____

Approved: _____ Denied: _____ Permit Fee Paid Date: _____ Check#: _____

Reviewed by: _____ Date: _____ Deposit Paid Date: _____ Check #: _____

Special Instructions: _____

Post-Special Event Walk Through Comments/Notes: _____