



**EASTTOWN TOWNSHIP  
CHESTER COUNTY, PENNSYLVANIA**

566 Beaumont Road  
Devon, PA 19333  
610-687-3000  
610-687-9666 (Fax)

**APPLICATION FOR  
PARK FACILITY USE PERMIT**

**PART 1 – INSTRUCTIONS**

- Review Chapter 306 Parks and Recreation of the Code of the Township of Easttown, available online at [www.easttown.org](http://www.easttown.org), for purchase at the Township Building or review at the Township Building.
- At least seven (7) calendar days prior to the desired Display Dates, submit this Application for Park Facility Use.

**PART 2 – APPLICANT INFORMATION**

Applicant / Permit Holder Name:

Organization Name (if different from above):

Applicant / Permit Holder Street Address, City, State, and Zip Code (if P.O. Box, include street address also):

Telephone Number:

Email Address:

Fax Number:

**PART 3 – LOCATION (park and the facility to be used – check all that apply)**

Hilltop Park (4 hour max per use)

- Park Field (single use)  
 Park Field (once per week for 13 weeks)  
 Park Field (weekly use – 4 per week)  
 Park Pavilion (single use)

Johnson Park (4 hour max per use)

- Park Field (single use)  
 Field (once per week for 13 weeks)  
 Field (weekly use – 4 per week)  
 Park Pavilion (single use)  
 Basket Ball Court (single use)

**PART 4 – PROPOSED DISPLAY DATES**

Proposed Start Date: \_\_\_\_\_

Proposed End Date: \_\_\_\_\_

**PART 5 – CERTIFICATION**

- I am an officer or official of the Organization applying for the use, or  
 have the authority to make this Application on behalf of the Organization applying for the use (attach delegation of signatory authority),

Acknowledge that the information provided in this Application, including any plans and specifications, is true and correct to the best of my knowledge and belief.

Name (type or print legibly) \_\_\_\_\_

Official Title \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**PART 6 – TOWNSHIP ACTION**

Permit Application Fee: \_\_\_\_\_

\$ \_\_\_\_\_  Paid  Cash  Check

Check No. \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Application Status:  Approved\*  
 Disapproved

Permit #: \_\_\_\_\_

Public Works Director's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

The following standard conditions shall apply to the Park Facility Use Permit upon issuance by the Township:

- (1) The facility shall be used solely for the purpose(s) of \_\_\_\_\_
- (2) Applicant/user agrees to comply with all ordinances, statutes and regulations of all Local, State and Federal authorities and agencies.
- (3) Applicant/user further agrees to indemnify and save Easttown Township harmless from all loss, damage, liability, claims and demands whether involving intentional misconduct, negligence or otherwise, arising out of or resulting from such use of facility.
- (4) Applicant/user shall not assign this Permit to another person.
- (6) NO ALCOHOLIC BEVERAGES OR CONTROLLED SUBSTANCES PERMITTED ON TOWNSHIP PARK PROPERTY AT ANY TIME.
- (7) The permittee shall be responsible for all damage to Township property caused by the rental and shall reimburse the Township for all costs it incurred to repair or replace the damaged Township property.