TARRANT COUNTY FACILITIES MANAGEMENT
PROPERTY USE APPLICATION

PLEASE COMPLETE ALL SECTIONS.

Location Requested: _____

Event Date(s): _____

Time of Event: _____

Description of Event (if more than three lines, please provide an attachment):

_____

_____

_____

_____ Electricity Required

_____ Set-up Equipment Requested from County (tables/chairs/podium/speakers, etc.)

Contact Person: _____

Address: _____ City: _____ State: ____ Zip _____

Cell Phone Number: _____ Email: _____

Name of Organization: _____

_____ Non-Profit _____ For-Profit

Primary Contact Person: _____

Address: _____ City: _____ State: ____ Zip _____

Business Phone Number: _____ Email: _____

Event On-site Contact Person & Cell Phone Number: _____

If Applicable:

☐ ***I hereby certify that I am a Tarrant County Official and will be using the Location Requested for an official purpose that is within my designated duties. Therefore, Tarrant County's "RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT" is not effective to release Tarrant County from liability against itself.***

Applicant's Signature: _____

Applicant's Printed Name: _____

Date: _____