



Fee Waiver Request City Council

Name of Organization: _____

Event Name/Type: _____

Event Dates: _____ Requested Council Meeting Date _____

Service and/or non-profit organizations may present a fee waiver application for consideration by the City Council. Such **applications will only be considered for events that are completely free of charge and contribute to the health, safety and well-being of the community and generate no revenue of any kind for the hosting organization.** Events that sell tickets, charge admission, sell tables or produce any kind of revenue for the organization will not be considered for this waiver. The Council may determine to waive up to 100% of the rental fee for such events on a case-by-case basis.

Every attempt will be made to place this item before Council at the requested meeting. When necessary, items may be scheduled at the next available meeting.

A Representative from your organization should be present at the meeting to address any questions Council may have about your event. You will be notified if your item is not on the requested meeting date.

Deposits are NOT waived.

Requested Fee Waiver: \$ _____

<u>Facility Rental Fees</u>		<u>Non-Profit Rate</u>	<u>Facility requesting</u>
Civic Center	\$250.00	\$125.00	<input type="radio"/>
Downton/ Farmer's			
Market Pavilion	\$100.00	same	<input type="radio"/>
Jack Cross Pavilion	\$100.00	same	<input type="radio"/>

- 1) Waiver requests must be submitted Before Noon (12:00 PM), ten (10) days prior to date of meeting
- 2) To withdraw your request, notify the City Secretary no later than five (5) business days prior to the meeting.
- 3) Once the topic has been presented to the Council, persons may not request that an item be placed on the agenda that is the same as or substantially similar in subject matter for six (6) months.
- 4) The City Council may or may not take action on the request.
- 5) Special meetings or workshops may be called as needed.
- 6) Agendas are posted online at www.cityofwinnsboro.org seventy-two (72) hours prior to the meeting date.

Applicant signature: _____ Date: _____

Affiliation with organization: _____

This request is subject to Open Records under the Public Information Act; however, personal email addresses are considered confidential. Listing your email address below is optional.

By signing this acknowledgement, the requestor is indicating their approval to release their email address should they include it on this request form.



City Council Fee Waiver Request

Please give a brief report of last year's event.

Event Date(s):

Approximate # of attendees:

Amount spent on advertising:

Advertisements placed with:

Revenue generated:

Additional information for consideration:



City Council Fee Waiver Request

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Number(s): _____

INTERNAL USE

Application Received By: _____ Date: _____

City Administrator
Approval: _____ Date: _____

Meeting Date: _____

Amount Waived: _____

Council Decision on waiver request:



Approved

Denied

Richard R. Parrish, Mayor

Date

12 Monthly Request History:

Meeting Date: _____ Approved Amount: _____ Event Date: _____