## THE UNIVERSITY OF ALABAMA OFFICE OF GROUNDS USE PERMITS APPLICATION FOR USE OF CAMPUS GROUNDS

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Local Address:		E-mail:	
City:		State:	Zip:
Representing (Name of	of UA Org. or Dept.):		-
Office/Position Held	in Org./Dept.:		
		FOAPAL):	
		t is on the Quad, please specify	
*At <u>NO TIME</u> will ur	authorized vehicles be	e allowed on the Quad for any re	eason.
Number of Perso	NS EXPECTED TO A	ATTEND:	
		in or attending your event?  imes during the event by a pare	
DATE OF USE:		TIME — From:nits must have at least a 3-5 busi	To: ness day notice for the ever
DATE OF USE:  Generally, The Office	of Grounds Use Pern	nits must have at least a 3-5 busi	
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9.	Will there be FOOD? Yes No				
	(if <b>yes</b> , please describe what will be served)				
	Will the food be <b>sold</b> or <b>given away</b> during the event?				
10.	Will there be <b>ALCOHOL</b> at this event?				
11.	<b>HEALTH &amp; SAFETY STANDARDS/LIABILITY</b> : I understand that this event must meet all health and safety requirements of the University, City and County of Tuscaloosa, and State of Alabama and agree to ensure conformity with all such requirements.				
	I further agree to take full responsibility to manage this event in such a way as to comply fully with UA's policy relating to the Use of University Space, Facilities & Grounds; the General Terms and Conditions; and all other relevant University policies and procedures.				
	I agree to remove all trash and other items associated with this event, and to return the grounds to pre-event condition. In the event that I fail to return the grounds to pre-event conditions, the University will assess the reasonable costs of labor (at a minimum of four (4) hours per person performing the labor), damages, clean-up, and repairs. For University organizations and departments, such reasonable costs will be assessed the University Account number provided above. For individual faculty and staff members, the University will provide me an invoice itemizing the amount I owe, and I agree to be personally responsible for the amounts set forth in the invoice. If I fail to pay the invoice within seven (7) days of the University issuing it to me, I authorize the amount of the invoice to be satisfied by payroll deduction (including a lump sum deduction) and by any other method allowed by law.				
	Applicant Signature: Date:				
	Applicant Printed Name:				
	Depending on the type of event proposed, there may be other forms or steps in addition to this one and other offices to contact before the event can be considered for approval. For example, a Work Order may need to be submitted if a need for grounds work or similar is requested. If you are a student organization, you will need to register your event with The SOURCE utilizing the Student Event Planning Form.				
	* Should you have questions, please refer to UA's Grounds Use Permit Website <a href="https://uafacilities.ua.edu/grounds-use-permit/">https://uafacilities.ua.edu/grounds-use-permit/</a>				
	* Please submit your completed application by using the submit button or email to:  1205 14th Street • Box 870294 • Tuscaloosa, AL 35487  groundspermits@ua.edu • 205-348-6777				
	Submit				
	Office Use Only:				
	Approved: Date: Confirmation Sent:				