

## City of Auburn, New York Department of Public Works 24 South Street, Auburn, New York 13021 (315) 255-4737

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Reset Form

## **Showmobile/Sound System Request Form**

Organization Requesting Units:	
Event:	
Date/Time:	Should be set up by:
Program starts at:	PM Program ends at:
Items requested:  Showmobile- Monday-Friday  Showmobile- Saturday-Sunday  Sound System - Fee \$50/day  1 Microphone  2 M  Description of where unit is to be set up:	•
Insurance coverages and a signed hold harmless agreement.	esent valid certificate of insurance to the City of Auburn with the required  See the separate Hold Harmless and insurance requirements form  of set up point if electrical equipment is requested (example: lights, etc.)
	olic Works/Recreation. If your request is approved, a copy will be returned to you person in charge of the facility at the date(s) and hours listed. You are exclusively hours listed.
At least seven days advance notice is necessary to rese PERSON IN CHARGE FROM REQUESTING ORGANIZATION:	erve these units.
Name	
Address	
City	State Zip Code
Telephone:	
Signature DO NOT W	Date of Request /RITE BELOW THIS LINE
Approved by:	Date Approved:
Amount due:	Amount paid:
Date paid:	Receipt No.: