

FEE WAIVER REQUEST AND APPLICATION

In order to be considered for a fee waiver request, you must complete this questionnaire and submit necessary documents as indicated below. A letter on the requesting organization's letterhead <u>must</u> accompany this application. The letter should include the reason for requesting a fee waiver and how this event benefits our community. Requests must be submitted 60 days prior to the event. Applicants must complete and submit Indoor or Outdoor Reservation Applications with this request. Incomplete applications will not be processed.

1) Is this a 501 c3 non-profit organization? Must provide supporting documentation for non-profit status before being considered for a fee waiver request. Example: A letter from IRS stating your non-profit status
2) Can you provide financial documents for the organization? Example: Bank statements or tax returns. If unable to provide these documents, please attach an explanation letter.
3) Is this the first time that your organization is asking for a fee waiver from ARD?
4) Is this a fundraiser?
5) How much money do you anticipate generating from this event?
6) Is there a fee or a charge for people to attend or participate in your event?
7) How does a fee waiver affect your event? Can you hold your event in a different location if ARD can not consider a fee waiver at this time? Please explain.
8) Have you asked for a fee waiver from other agencies in the community?
Please indicate which agency:
9) Are there any other agencies in the community that are working with you on this project? Please provide a list of these agencies and contact information.
10) If a full fee waiver is not granted, can your organization pay a percentage of the rental fees?
If no, please explain:
11) Will you consider paying for staffing and utility fees if we waive the rental fees?
12) If you are unable to meet one of the offers (Items 10 or 11 above), are you able to provide a hardship statement with supporting documentations, such as bank statements or tax returns? Please indicate what is being provided with this request:

FEE WAIVER REQUEST

PERSON MAKING REQUEST NAME OF THE ORGANIZATION IRS/NON PROFIT TAX ID NUMBER ADDRESS AND PHONE NUMBER				
Signature			Date	
	OFFIC	CE USE ONLY		
APPLICABLE FEES			FEES WAIVED	
Rental Fees	\$		\$	
Custodial Fees	\$		\$	
Alcohol Permit Fees	\$		\$	
Setup/Takedown	\$		\$	
Staffing Fees	\$		\$	
Miscellaneous Fees	\$		\$	
TOTAL FEES DUE	\$			
REQUEST APPROVED?	Yes	No		
COMMENTS:				
Approved by:			Date	