



SHOWMOBILE REQUEST FORM
CITY OF ATLANTA DEPARTMENT OF PARKS, RECREATION AND CULTURAL AFFAIRS
Office of Parks
233 Peachtree Street, NE
Harris Tower, Suite 1600
Atlanta, GA 30303
parksreservationist@atlantaga.gov
Phone: 404-546-6757 Fax: 404-546-9635

Date of Application: _____

Name of Event: _____

Date of Event: _____

Place of Event _____

Time of Event _____ to _____

Delivery Time: _____ Pick Up Time: _____
(Please note that you will be charged 1 hour prior to the delivery time and 1 hour after pick-up time listed.)

Total Amount Due: _____

Name of Organization/Person(s): _____

Address: _____

Phone Number(s): _____ E-mail Address: _____

Name of Contact Person(s): _____

Fee Schedule:

- * Tax Exempt Resident Organizations \$350/ 8 hour period
- * "All Other Resident Organizations" \$450/ 8 hour period
- * Tax Exempt Non-Resident Organizations \$600/8 hour period
- * "All Other Non-Resident Organizations" \$800/8 hour period
- * We will supply the use of the Showmobile and Driver ONLY
- * PA System and Generator are **NOT INCLUDED**.
- * Showmobile size is 32' wide x 24' deep

*****We request certified funds made payable to the City of Atlanta, and an insurance binder in the amount of \$1 million (naming the City of Atlanta as the insured).**

*****Certified funds and insurance binder MUST BE SUBMITTED 14 BUSINESS DAYS PRIOR TO EVENT.**

Submit To: Office of Parks
233 Peachtree Street, NE—Harris Tower, Suite 1600
Atlanta, GA 30303
Attn: Special Events Coordinator

Signature: Organization/Person(s) **Date**

Authorization: Office of Parks **Date**

Authorization: DPRCA/Commissioner **Date**