



**CITY OF WALKER-MINNESOTA**

**REQUEST TO USE CITY PROPERTY 1 of 2**

City of Walker  
Public Works Department  
205 Minnesota Avenue W  
PO Box 207  
Walker, MN 56484  
218-547-5504 or 218-536-0353  
[walkerpw@arvig.net](mailto:walkerpw@arvig.net)

This form is to be used when a person or group wishes to use City-owned property.

**Applicant Information:**

Applicant/Organization \_\_\_\_\_

Applicants Address \_\_\_\_\_

**You must provide two contact numbers for individuals that can be reached during the event:**

Contact Person \_\_\_\_\_ Contact Phone \_\_\_\_\_

Contact Person \_\_\_\_\_ Contact Phone \_\_\_\_\_

Applicant Email: \_\_\_\_\_

**PROPERTY REQUESTED**

- CONES**      **HOW MANY?** \_\_\_\_\_
- BARRICADES**      **HOW MANY?** \_\_\_\_\_

LOCATION \_\_\_\_\_

BETWEEN \_\_\_\_\_ &/TO \_\_\_\_\_

CROSS STREET \_\_\_\_\_ CROSS STREET \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_

START DATE \_\_\_\_\_ START TIME \_\_\_\_\_

DATE \_\_\_\_\_ TIME \_\_\_\_\_

END DATE \_\_\_\_\_ END TIME \_\_\_\_\_

**DESCRIPTION OF PURPOSE/EVENT** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SPECIFY** the items you are requesting:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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**2 of 2**

**RELEASE/HOLD HARMLESS AGREEMENT**

In order to participate in this event/activity, I agree to hold the City harmless and I waive any right to make claims or lawsuits against the City or anyone working on behalf of the City for any injuries or damages related to the alleged negligence of the City. This waiver does not apply to any injuries or damages that are the result of any willful, wanton, or intentional misconduct on the part of the City. My participation in this activity is voluntary and I understand the effect of this waiver on my legal rights.

I, the undersigned, do hereby accept responsibility for compliance with the above policies and guidelines and for payment of all fees. The City of Walker disclaims all liability for injuries or accidents arising from the use of this property.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**CITY OF WALKER ~OFFICE USE ONLY**

Special Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Detour and Barricade signage conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Authorized By: \_\_\_\_\_ Date Issued: \_\_\_\_\_

\_\_\_\_\_