



City of Ocala
RECREATION & PARKS DEPARTMENT
 828 NE 8th Avenue, Ocala, FL 34470
 Phone: (352) 368-5550 Fax: (352) 368-5514



SPECIAL REQUEST FORM

Name: _____ **Date:** _____

Mailing Address: _____

Phone: _____ **Email:** _____

In the box below completely and thoroughly explain your special request in detail with attendance, justification, purpose, recreational/community benefit, facility information, dates, organizations involved, etc. Attach any additional info or forms needed:

Special Request:

In exchange for free use of City of Ocala equipment we ask that you provide transportation. Name of Agency/Organization providing transportation:

Contact Name: _____ Contact #: _____

Proof of liability insurance and driver's license may be required.

Signature: _____ **Date:** _____

For Staff Use Only _____

Staff Comments:

Value of requested equipment/services: \$ _____

Staff Signature: _____ **Date:** _____

Director Action: **Approved** **Denied**

Comments:

Director Signature: _____ **Date** _____