

# OFFICE OF THE COUNTY ADMINISTRATOR

1 Public Square, Room 210  
www.darcosc.com

Darlington, South Carolina 29532

843-398-4100  
FAX 843-393-8539



## Application For Reservation Of Darlington County Owned Facility *Courthouse Grounds / Mural Parking Lot*

Please complete this application and forward to the County Administrator's Office a **minimum of two (2) weeks prior to the proposed event.**

Today's Date: \_\_\_\_\_

Building Requested: **Courthouse Grounds/Mural Parking Lot** *(Excludes Lobby & Restrooms)*

Date Requested: \_\_\_\_\_ Beginning/Ending Time : \_\_\_\_\_ *(Not available after 9 pm)*  
*(Minimum of 2 hour rental)*

Type of Event: \_\_\_\_\_

Name of Organization/Individual: \_\_\_\_\_

Will Admission Be Charged? Yes \_\_\_ No \_\_\_ Proceeds To Be Used For: \_\_\_\_\_

Name, Address & Telephone Number of Applicant:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: (Home) \_\_\_\_\_ (Mobile) \_\_\_\_\_ (Other) \_\_\_\_\_

I agree to personally assume the responsibility for all charges, liability and to insure enforcement of all rules governing the care and use of the **Courthouse Grounds/Mural Parking Lot.**

Electricity needed? Yes No

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

**\*NO** Reservation will be made until application has been approved. **\*NO** Alcoholic Beverages allowed on premises. **\*The premises are not** available for use after **9 p.m.** **\*This form MUST** be on the premises at all times. **\*Premises will be monitored.\*Please clean up all trash/debris. **\*NO ACCESS TO RESTROOMS.** Questions/concerns during event should be directed to Andrew Smith at 843-616-1990.**

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County Use

\_\_\_\_\_  
Name/Title

\_\_\_\_\_  
Date

Approved Disapproved