



Parks & Recreation Facilities Event Walkthrough Report

City of Borger Department of Recreation
1210 Bulldog Boulevard, Borger, TX 79007
Phone: (806) 273-0987 · Fax: (806) 273-0911
www.borgertx.gov



Renter Information

Name	Telephone:	Cell Phone:	
Address	City	State	Zip
Email Address	DL State / #:	Work Phone:	

Event & Facility Information

Event Date:	Park or City Facility:
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Pre-Event Walkthrough

Date of Walkthrough:	Time of Walkthrough:
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S – Satisfactory U – Unsatisfactory N/A – Not Applicable

Floors	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Bathrooms	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A
Walls	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Outdoor Areas	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A
Kitchen	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Trash	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A
Appliances	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Other: _____	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A

Comments:

Applicant Signature:	Staff Signature:	Date:
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Post Event Walkthrough

Date of Walkthrough:	Time of Walkthrough:
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S – Satisfactory U – Unsatisfactory N/A – Not Applicable

Floors	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Bathrooms	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A
Walls	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Outdoor Areas	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A
Kitchen	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Trash	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A
Appliances	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A	Other: _____	<input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N/A

Comments (including amount of deposit recommended for refund):

Applicant Signature:	Staff Signature:	Date:
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