



WPRF RENTAL CHANGE FORM

Permit holder Information (please print):

Permit holder name: _____

Permit Number: _____

Contact Phone (between 8-4): _____

Email Address: _____

Change requested:

Please check: Date Time Location

New Date: _____

New Time: _____

New Location: _____

If your rental requires an additional pre-payment or change fee, please include payment.

Payment Information:

Please check one: Cash Check Visa MasterCard

Payment Amt. \$ _____

Credit Card Number _____ Expiration Date _____

Authorized Signature _____

I understand only the first change to my permit is no charge. I agree to the additional charges (if any) incurred with the change to my existing permit. All changes made within 5 business days of event are \$25.00.

Signature _____ Date: _____

Office Use Only: Check Amendment Log

Additional Fee \$ _____ 1st change 2nd change (or more) Employee Initials _____