## Special Facility Use Agreement Policy

This policy is for City Properties not covered by current rental agreements or facility use agreements.

A fully completed application must be presented to the City Manager at least 60 days prior to the requested date in order to be considered. This will allow the appropriate boards to consider the request.

Once the rental rate is assessed it must be paid in full 15 days prior to the 1<sup>st</sup> day of rental.

The facilities will be used in a safe manner, and in compliance with all applicable federal and state laws and City ordinances, rules and regulations.

The City may enter the facilities at any time during the period of this agreement for inspection or supervision as deemed necessary.

The tenant shall indemnify and hold the City, its agents and employees harmless from any and all liability, costs, legal fees, expenses, damage or injury to participants or property, and any claim or causes of action arising out of the performance of this agreement or negligence.

This agreement may be modified only by a written agreement between the City and the Tennant.

Nothing within this agreement shall be construed as a waiver of governmental immunity by the City, its officers or employees.

The tenant shall not have the right to assign the interest it holds in this agreement.

The tenant should take proper steps to ensure that facilities and surrounding areas are free from litter, excessive noise, excessive traffic, parking problems, etc.

Nick Millwood, Mayor

Nicki Lundeen, City Clerk

Date

## SPECIAL FACILITY USE AGREEMENT APPLICATION

Date of Request				
Property Applying for			1.00170-1016 co	
Start Date and Time:		End Date and Time:		
Company Name				
Name of Applicant/Contact:				
Email Address:		•••••••••••••••••••••••••••••••••••••••		
Home or Business Address:				
Home or Business Phone:	Cell Phone	:#Fax#		
Description of how facility/pro	operty will be used		AWAYAA	
Rental Rate to be Determined				
List of All Vendors that will b attach).				
I/We confirm that all the inforcan be turned down for the papplication does not constitute	roperty if I/we have falsif	ied any information on this a	derstand that I/we application. This	
COMPANY NAME			- AAAAAA - AAAAAAAAAAAAAAAAAAAAAAAAAAA	
BY: (Authorized Signature)	ature)	DATE		
I acknowledge that I have ro Use Agreement Policy.	ead, understand and will a	comply with the rules of the	e Special Facility	
Office Use Only	过某某其 医乳腺 经金额 经金额 医甲基甲醛 化			
Received By:	Date:	Time:_		
City Council Date:	Approved	Denied		
DDA Date:	Approved	Denied		
Applicant has been notified: E	Pate: Time:	Notified by		
Payment Received: Date:	Amount:	Received By:		