



City of Plymouth CALIFORNIA

LODGE HILL
18565 EMPIRE STREET
PLYMOUTH, CA 95669

RENTAL AGREEMENT

NAME OF ORGANIZATION: _____

AGREEMENT MADE WITH: _____

ADDRESS: _____

TELEPHONE: _____

DATE & TIME FOR USE OF HALL: _____

PURPOSE/ACTIVITIES: _____

ARE YOU GOING TO: CHARGE ADMISSION: _____
 SOLICIT FUNDS: _____
 DUES: _____

PROCEEDS USED FOR: EXPENSE: _____
 ORGANIZATION: _____
 OTHER: _____

KEY TO HALL TO BE CHECKED OUT PRIOR TO EVENT TO:

NAME: _____
DATE: _____

REQUESTING

TABLES (10 AVAILABLE): _____
CHAIRS (60 AVAILABLE): _____
CAKE TABLE (2 AVAILABLE): _____

LODGE HILL RENTAL FEES

HALL RENTAL- \$100.00 PER DAY

SECURITY DEPOSIT-\$100.00

INDIVIDUALS/ORGANIZATIONS MUST HAVE AN INSURANCE POLICY FOR \$1 MILLION DOLLARS IN COVERAGE. THE CITY MUST BE GIVEN AN ENDORSEMENT NAMING THE CITY AS ADDITIONALLY INSURED, OR SPECIAL INSURANCE COVERAGE IS AVAILABLE THROUGH CITY HALL. ***SPECIAL REQUIREMENTS AND ADDITIONAL INSURANCE ARE REQUIRED FOR ALCOHOL OF ANY TYPE ON THE PREMISES.***

TOTAL CHARGES: \$100.00

CLEANING/DAMAGE DEPOSIT: \$100.00
(SEPARATE CHECK, REFUNDABLE IF HALL IS LEFT CLEAN AND IN ORDER.)

SIGNATURE OF LESSEE(S): _____

(INSURANCE COVERAGE MUST BE HELD BY A LESSEE.)

ADDRESS: _____

PHONE #: _____

DATE: _____

FOR STAFF USE

I, _____, HEREBY CERTIFY THAT THE ABOVE APPLICANT HAS RETURNED THE KEY AND HAS FULFILLED REQUIREMENTS OF THE CITY FOR USE OF HALL, ETC.

RETAINED: _____

RETURNED: _____

ADDITIONAL CHARGES: _____

EXPLANATION OF DISPOSITION:

TOTAL REFUND: _____

DATE: _____

LODGE HILL RENTAL CHECK LIST

1. Wipe off tables and chairs if needed.
2. Floor to be dust mopped and damp mopped if necessary. Do whatever is necessary to leave floor in the same condition as you found it. Dust mop and wet mop are available under staircase.
3. All garbage and trash must be removed. Please bag garbage and remove from City property.
4. Turn off lights.
5. Upstairs is locked and not available to the public.
6. Replace furniture into original form.
7. Decorations may not be attached to the walls in any way. (No tape, painter's tape, adhesive putty, nails, push pins, etc.) Suggestions: table decorations, balloons with weights attached, free standing cut outs or items attached to railings with ties.
8. Lock all doors.
9. Be respectful of the gravesite on the grounds. Do not enter the fenced in area.
10. Lodge Hill and its grounds are **NO SMOKING AREAS.**
11. ***Alcohol is not allowed on the premises without approval of the City, proper insurance and clearance through the California Department of Alcoholic Beverage Control if necessary.***

Failure to carry out items on check list will result in loss of cleaning/damage deposit. Final charges for which the lessee is responsible will be determined after the event. I.E. vandalism, cleaning is excess of deposit, etc.

Applicant hereby agrees to hold the City of Plymouth free and harmless from any injury to any person, loss, damage, liability, cost or expense that may arise during or be caused in any way by such use or occupancy of the property.

I, the undersigned, hereby certify that I will be personally responsible on behalf of the applicant for any damage sustained by the building, furniture or equipment accruing through the occupancy or use of said property or equipment by the applicant. All facilities are to be left in a neat and clean order.

I have read the above agreement and fully understand it.

Signature of lessee(s): _____

LODGE HILL REQUEST FOR ALCOHOL ON PREMISES

**REQUESTS FOR ALCOHOL ON PREMISES MUST BE SUBMITTED AT LEAST 21 CALENDAR DAYS
PRIOR TO THE SCHEDULED EVENT.**

DATE OF RENTAL: _____

TIME OF EVENT: FROM _____ TO _____

DESCRIPTION OF EVENT/HOW ALCOHOL WILL BE SERVED:

TYPE OF ALCOHOL TO BE SERVED: _____

ESTIMATED ATTENDANCE: _____

PROOF OF INSURANCE STATING ALCOHOL TO BE SERVED OR CITY SPECIAL INSURANCE WITH ADDITIONAL ALCOHOL COVERAGE MUST BE ATTACHED TO THIS REQUEST. ANY SALES, OR "NO HOST/CASH BAR" AT AN EVENT ADDITIONALLY REQUIRES A SPECIAL DAILY LICENSE OBTAINED FROM THE **CALIFORNIA DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL. (FORM ABC-221)**

SIGNATURE OF LESSEE(S): _____

ADDRESS: _____

DATE: _____

APPROVED BY: _____

DATE: _____