

SPRINGVALE TOWNSHIP
8198 East Mitchell Road
Petoskey, Michigan 49770

USE OF SPRINGVALE TOWNSHIP HALL
AGREEMENT

Date of Use/Activity: _____

Time: _____

Name of Group/Individual: _____

Person in Charge: _____

In consideration for the use of the Springvale Township Hall \$50.00 will be charged.
An additional \$50.00 deposit will be required and returned after activity is completed.

All rules and regulations are to be adhered to as outlined.

NO SMOKING is allowed in the building. [This is a public building and subject to the laws of the State of Michigan]

NO ALCOHOLIC BEVERAGES are to be sold, served or consumed on Springvale Township property.

NO RETAIL SALES to be conducted from the Springvale Township hall.

The building must remain in the same condition of cleanliness and repair in order to avoid additional cost.

The hall may be decorated with the following stipulations:

- a. Do not tape items to the walls, light fixtures, ceilings, doors, or windows.
DO NOT USE THUMB TACKS.
- b. All decorations must be removed the same day the hall is used.
- c. Do not attach anything to mail box or drop box.

No equipment, tables, or chairs shall be removed from the Township hall

The following checklist must be completed by the user

_____ Chairs and tables cleaned and replaced in their original locations.

_____ Kitchen and bathrooms cleaned

_____ Floors swept, mopped, and vacuumed.

_____ All trash and personal belongings removed.

_____ Lights turned off and heat turned down to 65 degrees.

_____ Window blinds open, windows and doors closed and locked.

INDEMNIFICATION AGREEMENT:

I, _____ agrees to defend, indemnify and hold harmless
[user]

the Springvale Township from any claim, demand, suit, loss, cost of experience, or any damage which may be asserted, claimed or recovered against or from Springvale Township by reason of any damage to property, personal injury or bodily injury, including death, sustained by any person whomsoever and which damage, injury, or death, arises out of or is incident to or in any way connected with the performance of this contract, and regardless of which claim, demand, damage, loss, cost of expense if caused in whole or in part by the negligence of the _____,
[user]

Springvale Township, or by third parties, or by the agents, servants, employees, or factors of any of them.

Signature _____ Date _____

Witness _____ Date _____

SPRINGVALE TOWNSHIP
TOWNSHIP HALL USE AGREEMENT

Springvale Township Resident Name _____

Resident Address _____

Resident Number _____

Date Hall Reserved _____

Identify Visible Damaged Areas: _____

The Township Board has selected Alyce Conrad (231-548-5532) to be the person charged with Township Hall inspections. The user is responsible for **CLEAN UP** of the hall and notifying Alyce prior to leaving the hall. If there is a problem with the condition of the hall Alyce Conrad will contact you to make arrangements to correct the problem. If additional cleaning and or repairs are required the user will be billed for additional cost.

By signing and dating below I attest that I am a resident/property owner of Springvale Township and that I have read and agree with the terms and conditions for the use of the Springvale Township Hall.

(Signature of Resident Reserving Springvale Township Hall)

(Date Signed)

Payment Method: Check/ Money Order Cash Check # _____ Deposit Check # _____

(Signature of Township Board Representative)

(Date Signed)

Key # _____ Date Key Returned _____

Hall Condition: Satisfactory Unsatisfactory

Cleaning and/or Repair Cost: Yes No

(Signature of Township Board Representative)

(Date Signed)

Cleaning and/or Repair Cost: \$ _____

Cleaning and/or Repair Cost Recovered: \$ _____

Method of Cost Recovery: Check # _____ Cash Amount \$ _____