TOWN OF POMFRET SENIOR CENTER FACILITY USAGE CONTRACT

Located at: 207 Mashamoquet Road, Pomfret Center, CT Mailing Address: 5 Haven Road, Pomfret Center, CT 06259

Let it be recognized that this is an agreement between the Town of Pomfret and (Please type or print clearly below)

Organization/Person:	
Organization/Person Address:	
What is the number of persons using the facility?	150
What type of event is to be held?	
What is the date of the event?	
What is the time span you are requesting? am/	pm to am/pm
Phone #, Cell Phone #, and e-mail address to reach you:	
Please list names and contact information of any other per this event:	rsons responsible for arranging
Fee per hour: \$25.00 per hour x number of hours =	\$
Refundable security deposit due is \$100.00 +	\$
Total Due:	\$
Please provide a current Certificate of Insuran	ce with your payment.
(See item 7. User Responsibility -	attached)

POMFRET SENIOR CENTER RENTAL - USER RESPONSIBILITIES

- 1. Agree to and abide by the Rules and Responsibilities as listed throughout this document.
- 2. Provide a responsible person as listed in contract to oversee your event.
- 3. Contact the First Selectman immediately in the event of any serious injury or emergency.
- 4. Contact the First Selectman or the Selectmen's office with any maintenance issues or aspects of the facility that may need attention or repair.
- 5. Keep the facility clean and return it to original format before exiting.
- 6. User may be required to pay for related maintenance fees above security deposit if damage is done during your event.
- 7. User shall provide the Town of Pomfret with a Certificate of Insurance showing at least \$1,000,000 general liability coverage with the Town of Pomfret, 5 Haven Road, Pomfret Center, CT 06259 listed as additional insured.

 If you are not a business you can request assistance from your insurance provider—or go to: www.rvnuccio.com and follow the prompts applicable to your event. This program will allow you to purchase single day insurance to cover your event.

TOWN OF POMFRET RESPONSIBILITIES

- 1. The Town of Pomfret reserves the right to supply appropriate staff to check permits and ensure the user is adhering to the Facilities Use Policy.
- 2. The Town of Pomfret will provide a safe and adequate facility including general maintenance of all areas.
- 3. The Town of Pomfret will make every attempt to notify the group contact person at least 24 hours prior to emergency closing for unforeseen maintenance issue or other purposes unless obvious weather or emergency situations force an unforeseen closure.

Signature of Lessee			***************************************
Today's Date			
Town of Pomfret Fi	rst Selectman Signature _	TT TO THE SECOND SE	
Date	Approved	Not Approved	-
Reason			·

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(sample attached)

TO ENSURE ACCURATE PROCESSING OF YOUR REQUEST PLEASE COMPLETE THE FOLLOWING STEPS:

Visit or call the Selectmen's Office to obtain a contract and confirm availability of the date you would like to hold your event.

Complete the Usage Contract and return it to the Selectmen's Office with payment, security deposit, insurance binder, and a self-addressed, stamped envelope.

Your date will be locked in and you may pick-up rental key at the Selectmen's Office for use at the Center.

After your event the rental key must be returned to the Selectmen's office. Once received your security deposit will be mailed back to you.

BY SIGNING THIS CONTRACT YOU ARE AGREEING TO FOLLOW THE RENTAL RULES AND RESPONSIBILITIES FOR THE POMFRET SENIOR CENTER AS LISTED:

- 1. A signed contract must be granted in order to use the Center
- 2. The facility must be clean at all times.
- 3. You may not adhere anything to the walls, ceilings, etc.
- 4. All decorations must be confined to the tables.
- 5. No alcoholic beverages are permitted on the premises unless a licensed bartender is hired. A copy of any such license must be submitted with the Contract.
- 6. No smoking is permitted anywhere on the premises.
- 7. No loitering or littering.
- 8. Whatever you bring to the Center, you must bring away with you including any trash that is generated by your event.
- 9. Return the room/furniture/kitchen area to the state in which you found it.

The premises consist of the building and the parking area.

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Revision: 10/01/15







SPECIAL EVENT INSURANCE QUOTATION

Event Type: Baby Shower	
Selected Coverage	Limit Selected
1. General Liability (Host Liquor Liability Included)	\$1,000,000/\$2,000,000
a. Care/Custody/Control Liability	Not Covered
b. Damage To Premises Limit	Not Covered
c. Medical Payments	Not Covered
d. Collapse of Temporary Structure	Not Covered
e. Contractual Liability	Not Covered
f. Hired and Non-Owned Auto Liability	Not Covered
g. Liquor Liability	Not Covered
h. Waiver of Subrogation	Not Covered
2. Accident Medical Expense	Not Covered
a. Accidental Death	Not Covered
b. Accidental Dismemberment	Not Covered
TOTAL:	\$216.30

Quote example for Saturday Baby Shower with 35 attendees, ou wish to purchase this exclusive insurance product please LOG IN

IF YOU WISH TO PÜRCHASE THIS EXCLUSIVE INSURANCE PRODUCT PLEASE LOG IN AT WWW.SPECIALEVENTINSURANCE.COM, COMPLETE THE ONLINE APPLICATION, PURCHASE AND PRINT YOUR POLICY.

If you have any questions or wish to speak to a customer service representative, please contact our office Monday - Friday, 8:30am to 5pm PST at 1-800-364-2433 or e-mail support@rvnuccio.com.

Notes:

- 1. Date of quote: 09/10/2015
- 2. Quotation is subject to online completion of the application and underwriting approval.
- 3. Must be purchased at least 24 hours in advance.
- 4. Coverage for weekend events must be purchased by 4PM Friday.
- 5. Prices subject to change without notice and may vary depending on the information you provide in the application.
- 6. Licensing information available online
- 7. Sample policy available upon request.
- 8. Policies are underwritten by Fireman's Fund Insurance Company, an A+ insurance carrier.

PAYMENT METHODS: CREDIT CARD