



City of Chardon

Chardon Municipal Center • 111 Water Street • Chardon, Ohio 44024-1201

--- APPLICATION for use of CHALET ---

Located at 220 Basquin Drive

Organization _____ By: _____ Title: _____
- or -

Individual _____ Address of Residence _____
(Proof of City of Chardon residency is required at time of application)

Date Requested _____ Reason for use _____

Phone(s) _____ Time requested _____ a.m./p.m. to _____ a.m./p.m.
Total hours of use _____
(Fee covers 4 hours of use. \$5 each additional hour)

Cancellation Policy: Cancellation or rental date change must be made 1 week in advance of rental date in order to receive a refund.

REGULATIONS FOR USE OF CHALET

- * No alcoholic beverages are permitted on the premises.
- * Pick up the key and security system remote at the dispatcher's window in the Police Department after leaving your drivers license as collateral.
- * No more than 50 people permitted inside (maximum capacity). There must be one adult for every 10 children.
- * **DO NOT** tape or nail anything on the inside or outside walls.
- * Before leaving: Complete renter's responsibility checklist posted on the utility room door inside the Chalet.
- * Immediately return the key and remote to the Police dispatcher and sign the back of this form before receiving your drivers license. Another party may be waiting to pick up the key.

I have read the above regulations regarding use of the Chalet. I understand that if I do not comply with the regulations, I (and the organization that I represent) may be banned from future use. I, individually and as authorized representative of the organization, accept responsibility for any and all damage to the Chalet or its fixtures or contents. I understand that noncompliance with any of the above regulations will result in forfeiture of the \$50 deposit. I further acknowledge that I will be responsible for any and all property damage. If use of the Chalet is not required after scheduling its use, I will notify the City Manager's Office @ 440-286-2600 ASAP.

Organizations must attach a Certificate of Insurance naming the City of Chardon as an additional insured.
Signature _____ Date _____, 20__

Approval from the Office of the City Manager: By _____ Date _____, 20__

Cash or two (2) separate checks received for:

- \$25 Resident Fee (4 hrs) + _____ additional hours (\$5/hr) = \$_____ Total Rental Fee
- or \$45 Non-Resident Fee (4 hrs) + _____ additional hours (\$5/hr) = \$_____ Total Rental Fee
- Refundable \$50 Security Deposit (the entire security deposit will be forfeited if the above rules and regulations are not followed)