

# Conway Township

8015 N. Fowlerville Road

PO Box 1157

Fowlerville MI 48836

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Phone 517-223-0358

Fax 517-223-0533

## Conway Township Hall Rental Agreement

Today's Date: \_\_\_\_\_

Renter's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Estimated Number of Guests: \_\_\_\_\_ (Maximum Capacity is 80)

Date of Event: \_\_\_\_\_ Time Period of Event: \_\_\_\_\_

**RENTAL HOURS: Monday through Saturday, 10 am to 9 pm. Hall must be empty no later than 9:30 pm.**

**Hall Rates: Rental Fee: \$150.00 Security Deposit: \$200.00**

**All fees must be paid during township hours prior to rental of the hall activity.**

**If Hall Rental is canceled at least 30 days prior to the scheduled event, the deposit will be refunded in full. Only half of the deposit will be refunded if canceled 15 to 29 days of the scheduled event. If canceled within 14 days of the event, no refund will be given on the deposit,**

# RENTER MUST BE A RESIDENT OF CONWAY TOWNSHIP

## Indemnification by Renter:

Renter agrees to indemnify, defend, and hold harmless Conway Township from and against any and all claims, debts, demands, expenses, lawsuits, damages, attorney fees, and obligations that may be made against or incurred by Conway Township which are connected in any way with Renter's use of the Conway Township Hall or this Agreement. If it becomes necessary for Conway Township to defend any action seeking to impose any liability, Renter will pay to the Township all cost, expense, judgment, and reasonable attorney fee's incurred by Conway Township in effecting such defense.

## Insurance:

**Renter shall deliver a Certificate of Insurance to Conway Township, no fewer than 10 days prior to the date of use, providing for at least \$500,000 in comprehensive general liability insurance coverage with Conway Township listed as an additional insured.** Such certificates are typically available through an existing homeowner's insurance policy or separately attainable policy for a minimum cost.

## Security Deposit:

Renter has provided Conway Township with a security deposit. Any damages, costs, or expenses incurred by Conway Township as a result of Renter's use or violation of this Agreement, including but not limited to missing or broken furniture, fixtures, appliances, or kitchen supplies, may be offset against Renter's security deposit. Any excess cleaning cost or trash removal cost, which shall be determined by Conway Township in its discretion, shall be deducted from the security deposit. It shall be the responsibility of Renter to pay any damage, cost, or expense incurred by Conway Township that exceeds the security deposit within 14 days of Renter's receipt of a statement setting forth the amount.

## Rules and Regulations:

- 1) Renter must provide the Rental Fee, Security Deposit, and Insurance Certificate prior to being allowed the use of the Township Hall.
- 2) Renter shall abide by this Agreement. Renter shall maintain the Township Hall and all of its contents in good condition during Renter's use.
- 3) No transferring, assigning, or subletting of the Hall or this Agreement is permitted. If Renter violates this provision, Renter shall forfeit the security deposit and Renter will lose Hall rental privileges for future events.
- 4) Outside doors must be kept closed at all times. Temperatures will be regulated by the Hall Attendant.
- 5) State Fire Marshall requires the hallway to be kept open. No tables, chairs or food will be allowed in the halls of the building.
- 6) Hall Attendant will open and lock up the building. Hall Attendant may monitor compliance with this Agreement during the event.
- 7) Renter shall not exceed the maximum capacity of the Township Hall.
- 8) Hall, foyer, kitchen, and bathroom floors must be swept and mopped prior to Renter leaving at the end of Renter's use.
- 9) Trash must be taken out to the dumpster at the end of Renter's use. Trash can liners must be replaced with the correct size liners at Renter's expense.
- 10) All tables, chairs, counters, sink, stove, microwave, and refrigerator must be cleaned and returned to the same condition as received.
- 11) All tables and chairs must be returned to the storage room exactly as Renter received them.
- 12) Children must be supervised at all times.
- 13) Renter shall make sure bathrooms have been cleaned.
- 14) All appliances must be turned off at the end of Renter's use (except the refrigerator).

- 15) Conway Township does not provide any consumable products, including but not limited to paper towels, table coverings, trash bags, or oven cleaning supplies.
- 16) No property can be left at the Hall to be picked up later. Everything must be gone by the end of Renter's use. Any property left at the Hall by Renter shall be deemed abandoned and may be disposed of by the Township.

**Prohibited Activities**

- 1) Renter is prohibited from using Conway Township Hall for commercial activities.
- 2) Renter is prohibited from engaging in any activities that violate any zoning ordinances, local, state, or Federal laws or regulations.
- 3) **No Alcohol or Tobacco Products are allowed in the Township Hall.**
- 4) Taping, tacking, and stapling decorations to the walls, dividers, and ceiling are strictly prohibited. This could result in loss of security deposit.
- 5) Red punch and purple grape Juice are prohibited. Any staining of tables, chairs, floor, counters, or any other surface will result in an extra charge.
- 6) No running, skates or skateboards are allowed in the Township Hall.

**By signing this Agreement, Renter agrees to the above terms, conditions, rules, and regulations. Renter understands that Conway Township Hall may be checked by the Hall Attendant prior to the Renter leaving.**

**Renter's Printed Name:** \_\_\_\_\_

**Renter's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Township Representative:** \_\_\_\_\_

**Date:** \_\_\_\_\_

FOR TOWNSHIP USE ONLY:

Security Deposit \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date: \_\_\_\_\_ TWP REP Initials: \_\_\_\_\_

Hall Rental \$ \_\_\_\_\_ Check # \_\_\_\_\_ Date: \_\_\_\_\_ TWP REP Initials: \_\_\_\_\_

Insurance Certificate—received and reviewed \_\_\_\_\_ Date: \_\_\_\_\_ TWP REP Initials: \_\_\_\_\_