



**TOWN OF LYNDEBOROUGH
RENTAL OF TOWN PROPERTY – CENTER HALL**

Name: _____ Address: _____
 Organization: _____
 Telephone#: _____ Rental Date: _____
 Function: _____ Time (From): _____ (To): _____
 # Attending: _____ Capacity Limitation: **100**

Rental Fees/Service Costs

_____ Official Governmental Boards, Committees and Commissions **No Charge**

_____ Community or Charitable Organizations: *Certificate of Insurance Mandatory* **No Charge**
 (Stipulation: All renters must have the Town of Lyndeborough listed on the Certificate of Insurance as **Additional Insured**, which relieves the Town of all legal liabilities.)

_____ Residents: *Certificate of Insurance Mandatory* **Rental Fee: \$100.00** _____
 (Stipulation: All renters must have the Town of Lyndeborough listed on the Certificate of Insurance as **Additional Insured**, which relieves the Town of all legal liabilities.)

_____ Non-Residents: *Certificate of Insurance Mandatory* **Rental Fee: \$150.00** _____
 (Stipulation: All renters must have the Town of Lyndeborough listed on the Certificate of Insurance as **Additional Insured**, which relieves the Town of all legal liabilities.)

_____ Energy Surcharge (October 1st through April 30th) **Fee Per Day: \$10.00** _____

_____ Security/Damage Deposit (Refundable: Submit separate check) **Deposit Fee: \$50.00** _____
 (Stipulation: The renter must leave the hall in the same condition it was in prior to rental, including the removal of all rubbish accumulated during said function. The deposit will be refunded following inspection of the hall.)

_____ Police Service Required (Large functions/gatherings to direct traffic/parking purposes, for functions that charge admission or accept donations, when alcoholic beverages are served). It is the applicant's responsibility to contact the Police Department (654-6535) in order to schedule special police duty for said function. **Detail Fee:** _____

of officers _____ x _____ hours x _____ \$47 per hour (min.4 hrs)

Total Amount Due: \$ _____

I have read the regulations stipulated on the attached form and agree to abide by said regulations as set forth by the Town of Lyndeborough.

Applicant's Signature: _____ Date: _____
Responsible/Insured Party

Rental Approval: _____ Date: _____
Authorized Town Official's Signature

cc: Renter, Office, Selectmen, Fire, Police, Highway, Custodian

**RULES AND REGULATIONS SET FORTH BY
THE TOWN OF LYNDEBOROUGH**

Please be advised that all parties using the Town Hall shall be responsible to abide by the following stipulations:

1. There is absolutely no smoking allowed in the building.
2. Turn off all lights including bathroom lights and make sure the entrance door is securely closed and locked before leaving the building.
3. The bulletin board may be used for postings and such. The use of tape, staples and tacks are not permitted on the walls.
4. Chairs are to be returned to the racks provided and tables returned to their original places.
5. The hall is to be left in the same condition it was in prior to use of said function. All parties are responsible for clean up and removal of all rubbish accumulated during said function. Failure to comply will result in the Town retaining the security deposit to cover cleaning costs and rubbish removal.
6. The Town Hall key must be returned immediately following said function.
7. During summer months do Not turn off refrigerator or water supply to building.
8. All renters agree to indemnify and hold the Town harmless from all liability, which may arise in connection with their use of Town property.
9. Rental of Center Hall does include the use of the kitchen facility.

POLICE SERVICES REQUIRED

1. At large functions or gatherings to direct traffic and/or for parking purposes.
2. Functions that charge admission or accept donations.
3. When alcoholic beverages are served and Liquor Liability Insurance has been submitted to the Town prior to said function.

Please Note: It is the applicant's responsibility to contact the Police Department (654-6535) in order to schedule special police duty for said function.

The Certificate of Insurance, Rental Fee a/o Related Service Costs must be submitted to the Selectmen's Office 7 days before said function.

Hall Key # _____ Date Received _____ Date Returned _____

Applicant's Signature: _____ Date: _____
Responsible/Insured Party