

Bel Marin Keys Community Services District (BMKCSD) 2023/24 Non-Resident Rental Application and Agreement

Renter's First and Last Name

Address

Primary Phone Number

Work Phone Number

Email

Requested Date of Rental: _____

Requested Hours of Rental: _____ to _____ Total Hours: _____*

* Standard Event Window is 6 hours. Additional hours may be added at \$400 an hour.

* Sunday – Thursday events must end no later than 10pm and music and loud noises must end by 9pm.

* Friday -Saturday events must end no later than 11pm and music and loud noises must end by 10pm.

Event/Activity: Party Reception Reunion Wedding
 Other _____

All events include the following:

- ♦ 100-person capacity Clubhouse
- ♦ A Table/Chair set up reduces the capacity to 80
- ♦ Deck overlooking North Lagoon
- ♦ 4 4-person Round tables on deck
- ♦ 4 2-person Cocktail tables on deck
- ♦ 4 Basic pop-up Umbrellas on deck
- ♦ 70" Monitor Screen in Clubhouse

Basic Rental Fee: \$2,000

Cleaning Fee: \$ 200

Security Deposit: \$ 600 (Check is held and returned to Renter - unless needed.)

Applicant may opt to include use of the following:

- ♦ Bar: No Yes - \$500
- ♦ Kitchen: No Yes - \$800

Applicant may provide the following:

- ♦ Caterer ♦ Servers
- ♦ Bartender ♦ Bar back and bussers

A Certificate of Liability Insurance naming Bel Marin Keys Community Services District as an additional insured shall be provided to the District Manager reflecting coverage on the event date.

A Walk-Thru of the premises is required prior to the start of the event.

All fees are to be paid to BMKCSO in advance of the event.

Reservations are made on a 'first-come, first-serve' basis. However, the District reserves the right to cancel, reschedule, or otherwise adjust the reservation when necessary or in the event of an emergency; and when a cancellation occurs, Applicant shall be refunded all monies paid.

Rental hours begin at the start time reflected above and the premises must be vacated at the end time. For time extending beyond the end time, a late fee of \$250 per hour, for each hour or a partial of an hour shall be assessed and paid from the security deposit.

Applicant is responsible for any additional cleanup or damage expense in excess of the cleaning fee and security deposit. BMKCSO will determine the additional cost, if any, and such amount shall be paid by the Applicant.

General Conditions: BMKCSO reserves the right to refuse rental of the Community Center in accordance with applicable State law.

Additional Rules, Regulations and Policy:

1. Standing room capacity is limited to 100 persons.
2. Seating capacity is limited to 80 persons.
3. Smoking is prohibited within the building, deck area, and within 50 feet from the entrances.
4. No firearms are allowed in the building.
5. No lanterns, "Tiki" lamps, torches, or any open flame or flare.
6. Rice or confetti or similar material is prohibited.
7. Mylar balloons and paper lanterns are prohibited.
8. Flowers, wreaths, floats or any similar material, may not be thrown into the lagoon.
9. Duct tape, tacks, staples, nails, screws cannot be applied to the walls, ceilings or windows.
10. All decorations and other material must be removed.
11. All garbage and recycle materials must be placed in the appropriate bins with lids located in the back alley of the kitchen. If the refuse exceeds the bin space provided, Applicant must remove the refuse.
12. Spills on the floor must be cleaned up immediately.
13. Parking availability is not guaranteed and is limited to the spaces provided. Overnight parking is prohibited.

Liability: Applicant assumes all liability for the event and must provide a Certificate of Liability Insurance naming **Bel Marin Keys Community Services District** as an additional insured, no less than 72 hours prior to the event.

Alcoholic Beverages: Serving alcohol shall comply with the laws of the State of California. **Serving alcohol to minors is strictly prohibited**, and it is the responsibility of the Renter to ensure that minors are not permitted to consume alcoholic beverages on CSD property.

BMKCSD Monitor: All events shall have a CSD representative present to monitor and ensure that conditions are met; and to be present in case of an emergency. The monitor shall open and close the Clubhouse.

Ground area below the Deck, Gangway, Dock and Work Boat are off limits: Guests shall have access to the interior of the building, except the office, the front of the building, and the back deck.

I, the undersigned, do hereby agree that I will abide by the policies, rules and regulations governing the use of the Bel Marin Keys Community Services District Clubhouse and will specifically accept financial responsibility for any damage or loss, including the cost of repair or replacement incurred by the Bel Marin Keys Community Services District to premises or equipment damaged during my use of these premises.

The undersigned, also agree to indemnify, defend, and hold harmless the Bel Marin Keys Community Services District, its officers, employees, agents, and licensees (individually and collectively) from all claims, lawsuits or legal liability for injuries to persons, including death, or to property arising out of or in any way connected with use of the premises rented herein or the activity for with this permit is issued.

I understand that permission for the use of the facility is granted upon the condition that all terms and rules reflected herein.

I am aware that this rental agreement is an enforceable contract between myself and the Bel Marin Keys Community Services District. I have read the entire agreement and I understand and agree to the terms and conditions reflected herein.

Applicant

Signature

Date

Printed Name

Bel Marin Keys Community Services District

Signature

Date

District Manager

For Office Use Only

Monetary Transaction

Rental Costs:

Rental Fee: \$2,000
Cleaning Fee: 200

Bar Fee: \$ 500 Yes No
Kitchen: \$ 800 Yes No

Rental Total: \$ _____ Date: _____ Check No. _____
(Attach photocopy of check)

Separate Check required:

Security Damage Deposit: \$600.00 Date: _____ Check No. _____
(Attach photocopy of check)

Applicant's Information

Applicant's information confirmed by BMKCSD Staff: Yes No

Certificate of Liability Insurance naming BMKCSD as an additional insured, received: Yes

Application Approved: Yes No

Staff Signature: _____ Date: _____

Return/Refund

Less Damaged Incurred: _____

Amount: _____ Date: _____ Check No. _____
(Attach photocopy of check)