



**Chittenden County Senior Citizens Alliance, Inc.**

DBA: Heineberg Community Senior Center

14 Heineberg Road, Burlington, VT 05408

(802)863-3982 – [www.heinebergcsc.org](http://www.heinebergcsc.org)

## **Rental Policy**

The following policy is for the rental and use of the Heineberg Community Senior Center set by the Board of Directors and followed by the staff. This policy contains information explaining the conditions for permission to use our facilities and, when necessary, the reasons for refusal. All explanations will be in written form and made available to groups making application to use our buildings or grounds.

**Hourly Rate:** \$50.00 upper or lower level \$60 with use of kitchen

**Security Deposit:** \$100 Returned in-full if there is no damage or excessive cleaning required after event

**Occupancy:** Upper Level: 118 with tables & chairs / 171 standing/dance Lower Level: 49

**No candles or flames can be used during rental period. Birthday candles are the exception.**

**Alcohol & Tobacco Policy:** Tobacco products are not allowed in the facility or on the premises. Alcohol is permissible only by BYOB (bring your own bottle) or served by a certified bartender. Proof of certification required.

**Liability Insurance:** A one-day certificate of insurance coverage if one day rental, continuous proof of insurance needed if more than one day. Adding the Heineberg Community Senior Center as additional insured is required. Proof of insurance certificate is required.

**Hold Harmless Clause:** All parties using the center shall acknowledge a hold harmless clause indicating that neither Heineberg Community Senior Center, nor any individual of the center staff can be held liable from incidents arising from the use of the facility by renter or any guests during time of rental.

**Indemnification Clause:** The owner/landlord will be held harmless for any negligent acts or omissions by the rental group during the time of the lease.

**By signing this contract both parties agree that:**

- A representative from the Center will perform a walkthrough, with rental person, the business day (Monday – Friday) before and after event. Equipment and facilities will be inspected and preexisting conditions noted. If it is discovered during post-event walkthrough that damage or loss occurred, rental person will not be refunded security deposit and he/she will be liable for additional costs for repairs/replacements. If rental person is unable to participate in walkthrough within agreed upon timeframe, he/she forfeits right dispute any noted damage.
- The Center will provide guidelines on proper use of applicable equipment and facilities: sound system, handicap door, elevator, kitchen appliances. As well as closing procedures and emergency exits. Under no circumstance is the Center liable for incidents arising from use of facility by renter or their guests.
- Center will provide rental person with a key to upper or lower level of center. The key is to be returned by the end of the next business day after rental. If key is not returned, rental person is responsible \$250 charge for key and lock replacement.

**To be filled out by rental person or representative for rental group**

Organization: \_\_\_\_\_

Non-Profit\_\_\_\_ Profit\_\_\_\_ Private\_\_\_\_

Contact Name: \_\_\_\_\_ Participant Yes\_\_\_\_ No\_\_\_\_

Phone: \_\_\_\_\_ cell \_\_\_\_\_

email: \_\_\_\_\_ Estimated number of People: \_\_\_\_\_

Date of Usage: \_\_\_\_\_ Starting Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Total hours: \_\_\_\_\_

Nature of Usage: \_\_\_\_\_

**To be filled out by Heineberg Community Senior Center Representative**

Certificate of Insurance on file: Yes \_\_\_\_ No \_\_\_\_

Fee waived for participant’s memorial? Yes \_\_\_\_ No \_\_\_\_

Total usage Fee: \$\_\_\_\_\_ (Hourly rate + \$100 refundable security deposit)

\$50 Deposit Received? Yes \_\_\_\_ No \_\_\_\_

Balance Due at pre-rental walkthrough (Total usage fee minus \$50 deposit) \$\_\_\_\_\_

Date balance due paid \_\_\_\_\_ Initials of center rep \_\_\_\_\_

What part of the building will you be using?

Upper Level \_\_\_\_\_ Lower Level \_\_\_\_\_ Both \_\_\_\_\_

Will you be using the Kitchen? Yes: \_\_\_\_ No: \_\_\_\_ Appliances? Yes \_\_\_\_ No \_\_\_\_

Will you be rearranging the furniture? Yes: \_\_\_\_ No: \_\_\_\_

Explain:

\_\_\_\_\_  
\_\_\_\_\_

Will you need access to decorate/drop items off prior to event?

Yes: \_\_\_\_ No: \_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

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\_\_\_\_ Instructions on usage of property and equipment, safety and security instructions, and phone list provided

Key given (please initial) Upper Level \_\_\_\_\_ Lower Level \_\_\_\_\_

*(If the Center’s key is not returned by the end of the next business day, there will be a \$250 fee to replace locks/keys)*

\_\_\_\_\_  
Rental person or group representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Heineberg Community & Senior Center Representative

\_\_\_\_\_  
Date

<p><b>Walkthrough completed – attach</b> (Center Representative and rental person initial and date)</p> <p><b>Pre rental</b></p> <p>_____</p> <p><b>Post rental</b></p> <p>_____</p> <p><b>Deposit Refunded</b> (Center representative and rental person initial and date)</p>
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<p><b>Key Returned</b> (Center Representative &amp; rental person initial and date)</p>
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