

First Ward
JOHN TANNER
MATT GILLOCK

City of Auburn

Third Ward
THERESE SVETLIK
CHRIS WARWICK

Second Ward
MARK KESSLER
TOM BEROLA

JOSEPH M. POWELL, Mayor

MARY THORNTON, City Clerk
TOM APPELT, City Treasurer

Fourth Ward
ROD JOHNSON
WAYDE RATHGEBER

CITY OF AUBURN, ILLINOIS COMMUNITY CENTER RENTAL AGREEMENT (B)

I, the undersigned, being a resident within the Auburn School District, do hereby agree to the terms set forth in this agreement:

- I) I agree to pay for or replace any items ruined or damaged during my use of this building because of negligence on my part or on the part of my guests.
- II) I agree there will be **NO SMOKING, NO CONFETTI, AND NO HEELYS** in the building.
- III) I agree to see that the following list of items is completed before leaving the building:
 - a) All food brought in is removed from the building.
 - b) Wipe off tables and return any furniture used to its original position.
 - c) Clean all kitchen utensils and appliances used.
 - d) Sweep floors. Mop as needed. Brooms and mops are located in the Utility Room.
 - e) Remove any black marks or scuff marks from the floor.
 - f) Take out garbage to Flowers Sanitation dumpster behind building.
 - g) Check restrooms; make sure toilets are flushed and not running.
 - h) Make sure all lights are off.
 - i) When you leave, the thermostat should be set at 65 in winter or 72 in summer.
 - j) Make sure doors are locked and building is secure.
 - k) Please return the key to the City Office on your way home. A drop box is available.

IV) I understand the building will be inspected by a city employee after my rental. All activities and clean-up must be completed by **1:00 a.m.** _____ (initials)

V) A \$50.00 deposit must be paid within a week of reserving the building.

VI) If I fully comply, I will receive my deposit less \$25 which will be retained by the City for maintenance purposes. I understand that if I fail to comply with any of this agreement, my deposit will be forfeited, a \$100 fee will be imposed, and I will be forfeiting my future use of the building. Failure to pay the additional \$100 fee within 30 days will result in water &/or gas utilities being turned off at the address listed below. _____ (initials)

VII) I WILL PICK UP THE KEY DURING CITY OFFICE WORKING HOURS Monday through Friday, 7:30 a.m. to 4:00 p.m.

Date of Use: _____

X _____
Signature of Responsible Party

Key # ___ Given to: _____

_____ Address

Date Key Given: _____

_____ Phone Number

Date Key Returned: _____

\$ _____
Deposit Amount Date Paid

REFUNDED: \$ _____ on _____ by CK # _____