



# THE CITY OF CHANDLER HOUSING AND REDEVELOPMENT DIVISION'S COMMUNITY SPACE POLICY AND USE AGREEMENT

## 127 North Kingston Only

Renter agrees to assume responsibility for the cost of repair or replacement if the community space or its equipment, furniture, fixtures, or other appliances specified in the attached inventory list are damaged.

- Renter agrees to use the community room solely for the purpose stated to the City of Chandler Housing and Redevelopment Division in writing.
- Renter also must be present at the function and assume responsibility for the conduct of all guests. Renter agrees to ensure that the guests do not make excessive noise or otherwise disturb the neighbors.
- Renter also agrees to play any music at a moderate volume only.
- Renter is aware that the community space is a **nonalcoholic** and nonsmoking facility.
- Renter agrees to comply with the City of Chandler Smoke-Free Policy, which states, "Smoking is not permitted anywhere on public housing grounds, to include living units, interior and exterior common areas, outdoor areas, and in or near public housing and administrative office buildings."  
~~-and agrees to ensure that guests who smoke do so outside the building and use ashtrays to dispose of all cigarette butts.~~

### FEE & DEPOSIT

Renter agrees to pay a fee of \$ **16.00 per hour** by check or money order for the rental of the community room. The deposit of \$100.00 by check or money order will need to be paid at least two weeks in advance of the event.

### RETURN OF DEPOSIT

The City Housing and Redevelopment Division agrees to return the deposit within 7 days of the rental only under the following conditions:

- The community space and its equipment furniture, fixtures, and other appliances specified in the attached inventory list are not damaged.
- Renter cleans the community space and returns it to its original condition immediately after the rental, including:
  - i. Turning off all electrical appliances, except the refrigerator in the kitchen;
  - ii. Wiping down all countertops, appliances and tables;
  - iii. Removing all food items from the refrigerator.
  - iv. Sweeping and mopping the floors and vacuuming all rugs. We will provide a broom, mop and vacuum upon request;

- v. Returning all furniture to the original position;
- vi. Locking all doors; and
- vii. Throwing out all garbage ~~and cleaning out containers of cigarette butts~~; and
- viii. Cleaning restrooms

Renter returns the community space key to the management office by noon of the day after the event.

**MANAGEMENTS RIGHT TO REIMBURSEMENT**

Management shall deduct from the deposit the costs of repairing damage to the community space and repairing or replacing any items on the attached inventory list that are damaged or missing (including the cost of changing the lock on the community space door if the key is lost).

Management will deduct a cleaning fee of \$16.00 per hour per maintenance person from the deposit if staff must complete any of the cleaning tasks listed in Return of Deposit, above.

Renter agrees to pay any replacement of repair costs that exceed the amount of the deposit.

**INDEMNIFICATION**

To the extent permitted by law, Renter shall indemnify and hold harmless the City of Chandler Housing and Redevelopment Division, its managing agent, and their respective officers, directors, beneficiaries, shareholders, partners, agents, and employees from and against all fines, suits, damages, claims, demands, losses, and actions (including attorney's fees) arising out of, or relating to, all acts, failures, omissions, and negligence of Renter, his or her agents, employees, visitors, guests, invitees, and contractors arising out of, or in any way relating to, Renter's use of the community room. This indemnification shall apply both to claims of third parties and to claim of the Renter or any guest of the Renter.

Tenant: \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Housing Administrative Supervisor Date

# COMMUNITY SPACE AND USE RENTAL FORM

\_\_\_\_\_  
Date of the request:

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Message Phone Number

127 North Kingston Street

\_\_\_\_\_  
**Community Space Location**

\_\_\_\_\_  
**Purpose**

\_\_\_\_\_  
**Date Needed**

\_\_\_\_\_  
**Time of Use**

<b>HOUSING OFFICE INFORMATION</b>
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**REVIEWED BY:**

\_\_\_\_\_  
Housing Representative

**APPROVED TO BE FORWARDED:**

\_\_\_\_\_  
Housing Administrative Supervisor

**PERMISSION GRANTED BY:**

\_\_\_\_\_  
**Housing and Redevelopment Manager**

**CC: Housing Maintenance Supervisor**