

CHAGRIN FALLS TOWNSHIP

83 North Main Street
Chagrin Falls, Ohio 44022
(440) 247-8422

Trustees

Thomas F. Florkiewicz
John Finley
Michael W. Wise

Fiscal Officer
Elizabeth Boles

RENTAL AGREEMENT – Daily Rental by For Profit

Please fill out in duplicate. Keep one copy and send one copy to Township Office with at least 50% of the rental fee and a separate security deposit check. Balance of rental fee is due before use of Town Hall commences.

Name/address of person/organization responsible for event:

Phone number: _____, Rental Dates: _____, Tax I.D. number: _____

Chagrin Falls Non-Profit Sponsor and contact: _____

Chagrin Valley Chamber Member (Initial to confirm membership): _____

You will receive the key to the Township Hall the time you write down. Please include the time it will take to set up and clean up the Hall in your rental hours.

Number of persons attending: _____ (fire code max. is 110 w/ tables and 250 without tables)

Rental Fee (\$500.00/day - Initial and provide check number): _____

Security Deposit (\$500.00 – Initial and provide check number): _____

The undersigned Applicant has read the “Township Hall Rental Policy” pertaining to this request and use of the Chagrin Falls Township Hall, which are incorporated herein, and agree to be bound by the same. The Policy can be found at www.chagrinfallstowship.org/hallrental/html.

Signature of Applicant

Date

Revised: October 3, 2016