



City of Reed City

227 E. Lincoln Ave. Reed City, MI,
Phone (231) 832-2245 Fax (231) 832-9166

William & Mable Porteous Depot Rental Agreement

Event: _____

Event date: _____ Time: From _____ To _____

*You are allotted **30 minutes** on both sides of your time for set up/clean up. If you require more time than that, please add additional time to your reservation.*

Organization/Responsible party: _____

Address/City/Zip: _____

Telephone: _____ Email: _____

Room Rates:

- | | | |
|---|--|--|
| ☐ 1 hour - \$25 | ☐ 2 hours - \$50 | ☐ 3 hours - \$75 |
| ☐ 4 hours - \$100 | ☐ 5 hours - \$125 | ☐ 6 hours - \$150 |
| ☐ Full Day - \$175 | | |

This agreement is between the City of Reed City (the "City") and the Client(s) (the "Client") renting the William & Mable Porteous Depot. By renting the facility, the Client(s) agree to the following terms and conditions:

- Payment of a non-refundable deposit of \$50.00 along with this signed agreement, will be required to reserve the date.
- Deposit is payable online at reedcity.org, in person, via mail or dropping in our drop box located on the east side of our building. Address for City Hall is: City of Reed City, 227 E. Lincoln, Reed City, MI 49677.
- Remaining balance is due PRIOR to event date.
- Once paid in full, the key for the Depot can be picked up anytime during the week leading up to the event at City Hall (Mon-Fri between 8:00 AM - 4:30 PM). **City staff will not be available on the weekends or before 8:00 a.m. on a weekday to issue keys so please plan accordingly.**
_____ (initial – you have read and understand)
- Leave key in the drawer to the left of the sink after locking up the Depot.

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Amount paid: _____ Date paid: _____ Remaining Amount Due: _____ Paid in full ☐
Key #: _____ Date Issued: _____ Date Returned: _____

LIABILITY: The Client is responsible for any damage to the building caused by the Client, or anyone involved with their event, including guests, employees, coordinators, or contractors. The City is not liable for any injuries or damage that may occur on the premises except for the willful misconduct or gross negligence of the City. The City shall have no liability for the food and beverages served on the premises. The City is held harmless from any liability for food and/or beverage which is consumed at or after the event, or for any injury or liability as a result of this agreement and/or resulting from any activity on the premises.

CATERING SERVICES: Clients are welcome to bring any caterer of their choice. The City will not be responsible for Client's caterers or the receiving of/delivery and setting up of food.

TABLES & CHAIRS: 48 chairs and 25 tables are available for use. Tables measure 5' long and 2' wide. Prior to leaving, the tables and chairs need to be put back the way they were found.

DISPLAYS & DECORATIONS: The City will not be responsible for decorating, or set up as required before the beginning of the event. The City does not allow the affixing of anything on the walls, floor, and ceiling of the rooms or items on furniture, with nails, staples, tape or any other article, unless approved in writing by the city. The cost to repair any damage shall be billed to the client.

CLEANING: Cleaning and removal of any leftovers, food, trash, etc. from premises is to be done by client. The area is to be cleared and cleaned by Client. Trash cans and bags will be provided by the city for disposal of trash – please place all trash into the dumpster outside. Cleaning fee will be added if not left as found.

SMOKING: Smoking is prohibited inside the building. A NO SMOKING POLICY will be enforced.

SECURITY: The city shall not assume responsibility for damage, lost merchandise or equipment brought into the premises.

DO NOT DRIVE ON THE BRICKS! You may pull on the paved trail for loading/unloading.

PHYSICAL ADDRESS for the Depot is 200 N Chestnut Street, Reed City.

OUTSIDE SPACE: The outside pavilion, fire pit and bathroom are available for public use and cannot be excluded for private events.

CANCELLATION: The \$50.00 deposit confirms your reservation. Please note that the deposit is non-refundable if the event is canceled within 48 hours of the scheduled date.

PLEASE ADVISE GUEST OF THESE RULES.

This agreement reflects the full understanding between both parties. No additional written or verbal agreements exist beyond what is stated here.

Client Signature: _____ Date: _____