

"Farthest North Incorporated City"

### **REQUEST FOR USE OF CITY FACILITIES**

## This application is not considered completed until all four of the following sections have been completed. No Facility Use Application will be accepted for scheduling and approval after 4:30 pm.

### 1. FILL IN THE BLANK AS COMPLETELY AND ACCURATLEY AS POSSIBLE

| Name of Sponsor  | ring Organiza   | ation:  |                     |              |                 |                     |                 |           |                     |                |                    |  |
|--|-----------------|---------|---------------------|--------------|-----------------|---------------------|-----------------|-----------|---------------------|----------------|--------------------|--|
| Mailing Address  |                 |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| Primary Contact:   |                 |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| Phone #:   |                 |         |                     | Email Ac     | ldress:         |                     |                 |           |                     |                |                    |  |
| Facility Requeste  | ed: City        | Chamb   | bers <sup>*</sup> C | Community    | Center          | Piuraagvi           | k               | Roller Ri | ink 7               | Tupikpak       | Youth Center       |  |
| Area(s) To be use  |                 |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| Nature of Activit  | iy:             |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| Expected Attend  | ance:           |         |                     | Orga         | nization        | zation Form For Inc |                 | ndividua  | l l                 | Non Profit     | Profit             |  |
| Date(s) of Intend  | ded Use:        |         |                     |              | Date 0          | Confirmed           |                 |           | Staff Notice        |                |                    |  |
| Time(s) of Intend  | ded Use:        |         |                     |              | Equip           | ment Confir         | med             |           | Equipment Condition |                |                    |  |
| 2. ADMIN   |                 | ON W    | ILL RE              | QUIRE A      | AN AP           | PROVED S            | SECU            | RITY I    | PLAN                |                |                    |  |
| 1 <sup>st</sup> Security Name  |                 |         |                     |              |                 |                     |                 | Phone #   | :                   |                |                    |  |
| 2 <sup>nd</sup> Security Nam   | ne:             |         |                     |              |                 |                     |                 | Phone #   | :                   |                |                    |  |
| Cleaning Superv  | isor:           |         |                     |              |                 |                     |                 | Phone #   | :                   |                |                    |  |
|  | 0               |         | e                   | • 1          |                 | e                   |                 |           | lowed dur           | ing the use of | of the facilities. |  |
|  | e read the rule | -       |                     | -            | -               |                     |                 |           | 250.00              |                | 1                  |  |
| 2. I/We understand that a Refundable Security Deposit in the amount of either \$100.00 or \$350.00 will be required in advance of any activity in addition to the rental cost identified in the payment schedule. The Refundable Security Deposit for activities |                 |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
|  |                 |         |                     |              |                 |                     |                 |           |                     |                | fee is \$350.00.   |  |
| The depo   | sit is complete | ly refu | ndable, exc         | cept that an | y cleanin       | g charges or o      | lamages         | s will be | deducted            | from the dep   | oosit              |  |
| Signature:   |                 |         |                     |              |                 |                     |                 | Date      | e:                  |                |                    |  |
| Representing:  |                 |         |                     |              |                 | Pho                 | hone #:         |           |                     |                |                    |  |
| 3. DATE  | & TIME E        | QUIP    | MENT N              | NEEDED       | , COS           | Γ, CLEAN            | -UP, S          | ECUR      | ITY CO              | <b>NFIRMA</b>  | TION               |  |
| AND A  | PPROVAL         |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| Recreation Appro   | oval:           |         |                     |              |                 |                     |                 | Date      | :                   |                |                    |  |
| Mayor Approval:  |                 |         |                     |              |                 |                     |                 | Date      | :                   |                |                    |  |
| 4. USE IS NOT CONFIRMED OR FINALIZED UNTIL SECURITY DEPOSIT AND FACILITY USE   |                 |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| FEES HAVE BEEIN PAID IN FULL WITH ACCOUNTING   |                 |         |                     |              |                 |                     |                 |           |                     |                |                    |  |
| Deposit Paid:  |                 |         | Date:               |              |                 |                     | Staff Initials: |           |                     |                |                    |  |
| Rental Paid:   |                 | Date    | :                   |              | Staff Initials: |                     |                 |           |                     |                |                    |  |
| Balance Paid:  |                 |         |                     | Date         | :               |                     |                 | Staff     | Initials:           |                |                    |  |
| Revised 9/24/2018-I  | KKT             |         |                     |              |                 |                     |                 |           |                     |                |                    |  |

\*Please notify the City Clerk when requesting to use the City Chambers and utilizing City Equipment



### "Farthest North Incorporated City"

## THE SPONSOR IS RESPONSIBLE FOR CLEANING THE FACILITY AFTER THE EVENT IS COMPLETED

- 1. The Facilities Use Permit does not authorize the use or operations of any City equipment other than that stipulated on the permit. The permit holder will be expected to furnish his/her own expendable supplies and will not make use of City equipment without prior approval.
- 2. If the facility is not used in accordance with hours shown or additional personnel are required, a revised bill will be issued to the Permit Holder.
- 3. Facilities Use Permit are limited to the specified room and rooms, during the hours and days specified. The permit holder shall ensure that the remainder of the building is not entered. Facilities will be opened at the time scheduled for the activity to begin and closed at the time scheduled for its conclusion.
- 4. In the event of damage to the facility or equipment (other than normal wear and tear) the Permit Holder shall accept the City of Barrow's estimate of the amount of same and shall pay all appropriate costs.
- 5. All organizations using the City of Barrow Facilities shall provide adequate adult supervision (security) which shall remain with the group during all activities and be responsible for the group's conformance with all appropriate rules and regulations, **including curfew regulations**.
- 6. No use of tobacco or possession of firearm, possession of intoxicating liquor or illegal drugs, fighting, betting, or other forms of illegal gambling will be allowed upon the City of Barrow premises or within any facility
- 7. The Permit Holder shall be responsible for the conduct and control of both patron and participants, and must comply with all applicable state and federal laws, city ordinances, City policies and permit conditions.
- 8. The City of Barrow will not be responsible for loss of personal property by individuals or groups attending activities when building is being used for activities under a Facilities Use Permit.
- 9. A Facilities Use Permit may be canceled if a facility is required for the City of Barrow use.
- 10. No Sub-Leasing of facilities shall be permitted
- 11. The Mayor or Recreation Director shall have the authority to impose reasonable conditions in additions to those specified in this section, where necessary.
- 12. The Permit Holder may not have no more than one permit active at any one time. (only 1 reservation)
- 13. Rental fee and Refundable Security/ Deposit of \$100.00 or \$350.00 must be paid prior to use of any City of Barrow Facility before permitting process is complete. Payment of cleaning deposit does not ensure approval of request. Cleaning deposit will be returned upon successful completion of clean-up check list.

# **INDEMNIFICATION**

The USER assumes all responsibility and liability for the requested use and agrees to the fullest extent permitted by law, to defend, indemnify and hold harmless the City of Barrow, its elected and appointed officials, employees, and volunteers against any and all liabilities, claims, demands, lawsuits or losses, including costs and attorney fees incurred in defense thereof, arising out of or in any way connected or associated with this agreement.



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# FEE SCHEDULE FOR ALL FACIILTIES

Non-Profit entities may request a "Fee Waiver Consideration" from the Mayor for facility usage. For the request to be considered by the Mayor, it must be in writing and received by the Mayor at least two weeks prior to the event detailing its purpose, as well as, potential participants. Considering the fact that the City of Utqiagvik is also a non-profit entity currently experiencing revenue declines, all Waiver Considerations will not be approved or granted.

| Facility             | Price Without      | City Equipment                   | I                            | Price With City Equipment    |  |  |
|----------------------|--------------------|----------------------------------|------------------------------|------------------------------|--|--|
| Piuraagvik           |                    |                                  |                              |                              |  |  |
| Entire Facility:     | \$200 per hour     |                                  | \$25                         | \$250 per hour               |  |  |
| Gym Floor:           | \$50 per hour      |                                  | \$75                         | \$75 per hour                |  |  |
| Multipurpose Room:   | \$50 per hour      |                                  | \$75                         | \$75 per hour                |  |  |
| Lock-In              | \$350 Deposit      |                                  | 10:0                         | 00 pm – 7:00am \$400.00      |  |  |
| Roller Rink          |                    |                                  |                              |                              |  |  |
| Entire Facility:     | \$75 per hour      | \$75 per hour                    |                              | \$100 per hour               |  |  |
| Birthday Party Rate: | \$100 per party *4 | \$100 per party *4 hour max*     |                              | \$150 per party *4 hour max* |  |  |
| Community Center     |                    |                                  |                              |                              |  |  |
| Entire Facility:     | \$200 per day      | \$200 per day \$300 per night Bi |                              | \$150 per night (Wednesday)  |  |  |
| Pool Hall Center     |                    | 1                                |                              |                              |  |  |
| Entire Facility:     | \$50 per hour      |                                  | NA                           |                              |  |  |
| Youth Center         |                    |                                  |                              |                              |  |  |
| Entire Facility:     | \$75 per hour      |                                  | \$100 per hour               |                              |  |  |
| Birthday Party Rate: | \$100 per party *4 | hour max*                        | \$150 per party *4 hour max* |                              |  |  |
| Lock-In              | Security Deposit   | Security Deposit \$350           |                              | 10:00 pm – 7:00am \$350.00   |  |  |
| Council Chambers     | \$300 Full Day     | \$300 Full Day                   |                              | \$150 Half Day               |  |  |
| Tupikpak             | \$100 per hour     |                                  | \$20                         | \$200 per hour               |  |  |



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# Facility Clean-Up Check List

Sponsorship is responsible for cleaning the facility after the event is completed. This check list must be completed and submitted within ten days of the event to receive refund deposit.

### ROLLER RINK

SPONSOR IS RESPONSIBLE FOR THESE RULES: NO ONE UNDER 18 YEARS OF AGE AFTER MIDNIGHT, MONITORING ALCOHOL CONTROL, <u>SPONSOR IS RESPONSIBLE FOR INFORMING THE CITY STAFF WHEN YOU NEED ASSISTANCE FROM THE POLICE</u>.

Chairs away & wipe

Wipe & put tables away

Sweep Floor

Mop Floor

Sweep Ladies bathroom floor

Mop Ladies bathroom floor

Sweep Men's bathroom floor

Mop Men's bathroom floor

Pick up trash & put in dumpster outside

#### **PIURAAGVIK**

SPONSOR IS RESPONSIBLE FOR: NO STREET SHOES, NO FOOD OR DRINKS ON GYM FLOOR OR NO KIDS IN THE RACQUETBALL ROOMS, NO DUNKING OR HANGING ON RIMS, NO KIDS IN THE SAUNA AREA, SHOWER, WEIGHT ROOMS & EQUIPMENT AREAS.

|  | Roll up mats & put away, if used   |
|--|--|
|  | Put away chairs & wipe   |
|  | Put away tables & wipe   |
|  | Sweep entryway & snack area (all gray deck area)                             |
|  | Mop entryway & snack area (all gray deck area)                               |
|  | Sweep floor on basketball court, mop if needed                               |
|  | Sweep floor on walkways, mop if needed                                       |
|  | Sweep boys bathroom floor  |
|  | Wipe down mirror, counter, and benches, remove all trash (in boys bathroom)  |
|  | Mop boy bathroom floor   |
|  | Sweep girls bathroom floor   |
|  | Wipe down mirror, counter, and benches, remove all trash (in girls bathroom) |
|  | Mop girls bathroom floor   |
|  | Sweep bleachers & mop  |
|  | Empty trash cans & place in dumpster   |
|  |  |
|  |  |

#### **COMMUNITY CENTER/TEEN CENTER**

| Sweep the floor |
|-----------------|
| Mon the floor   |

Mop the floor

Put chairs away & wipe down Put tables away & wipe down

Empty trash cans & bring to dumpster

|     |    | THERE IS AN | INCIDENT PI | LEASE COMP | LETE THE | ATTACHED | INCIDENT | REPORT |
|-----|----|-------------|-------------|------------|----------|----------|----------|--------|
| YES | NO |             |             |            |          |          |          |        |

Date



# Incident Report

Incident Reports must be completed and submitted within 24 hours of the incident

| Date of Incident   | Time of Incident  |                            | Location of Incident  |        |  |
|--|---|----------------------------|---|--------|--|
| Type of Incident         Injury         Security         Accident         Citizen Complaint/Concern         Staff Complaint/Concern         Damage to Equipment/Facility | Agency/Sta<br>Police/911<br>Supervisor<br>Maintenance<br>Personnel<br>Risk Manager<br>Mayor | aff Notified               | Injury Patron Injury Staff Injury Ambulance Transport First Aide provided by s Ice Pack Band-Aid Other: |        |  |
| Person(s) Involved 1 2 3 Summary of Incident:  |   | Witnesses: $\frac{1}{2}$ 3 |   |        |  |
| Action Taken:  |   |                            |   |        |  |
| Staff Name   |   | Staff Signature            |   | Date   |  |
| Cant Tax   |   | T:41.                      |   | No.4 a |  |

| Stari Name  | Stari Signature | Date |
|-------------|-----------------|------|
| Sent To:    | Title           | Date |
| Reviewed By | Title           | Date |



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# **Incident Report-Continues**

| Summore of Insident Continued  |  |
|--------------------------------|--|
| Summary of Incident Continued: |  |
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| Action Taken Continued:        |  |
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Staff Recommended Action: