

Facility Use Form 41



Circle Facility Requested: *Conference Center / Station 82 Conference Room / Station 83 Training Tower*

Reservation Date(s): _____

Time Frame of Event: _____

**Note this time frame includes your set up time, event time, and clean up time.*

Number of Guests: _____ Does an additional fee apply? Yes / No

**There is an additional \$380 fee for events with alcohol.*

**There is an additional \$130 fee for weddings & birthdays without alcohol.*

If applicable, explain the nature under which alcohol will be served: _____

If you are requesting to use the *Station 83 Training Tower*, does your agency carry one million dollar per occurrence commercial liability insurance? Yes / No / Not Applicable

Meeting Type / Course: _____

Organization: _____

Circle Type of Group: *Government Agency / Personal / NonProfit Corporation registered with State of WA / Profit*

Is your group within Lake Stevens? Yes / No

Contact Info for responsible individual. Name: _____

Phone: _____ Email: _____

The undersigned acknowledges that they have received and read a copy of the District's *Use and Rental of District's Facilities Policy 140* and agrees to be bound by the terms and conditions contained in the policy. Additional charges will apply if facility is not left in a clean fashion or if Station 82 Conference Room event info is changed from original request.

The undersigned agrees to hold the District harmless from all damages of every kind and nature, including costs and attorney fees incurred by the District, that may be claimed or accrue by reason of any accident in or on the premises resulting from the undersigned's use or occupation of the premises or caused by the acts or negligence of the undersigned or any agent or invitee of the undersigned.

Applicant Signature

Applicant Printed Name

Email Facility Use Form to: facilityuse@lsfire.org

Or Mail to: Lake Stevens Fire / Attn: Facility Rental, 1825 South Lake Stevens Road, Lake Stevens, WA 98258.

Certificate of Insurance/Alcohol Permit should be sent to Lake Stevens Fire / Attn: Facility Rental.

Event reservation will be confirmed once the completed Facility Use Form and payment (if required) are received.

Checks should be made payable to "Lake Stevens Fire".

The following information is required ONLY if you are renting the Conference Center. Additional charges will not be placed on your credit card unless the Conference Center is left in an unclean fashion as determined by the District employee responsible for facility maintenance. This information will be kept confidential and secure, and shredded after the event takes place.

Type of Payment Card: *American Express / Master Card / Visa / Discovery* Expiration Date on Card: _____

Name on Payment Card (please print): _____

Full Number on Front of Card: _____ Last 3 Digits on Back of Card: _____

Billing Address: _____

Lake Stevens Fire Administration Use Only

Reviewed & Posted by: _____

Additional Notes: _____

Alcohol Permit	(Yes) (N/A)	
Certificate of Insurance	(Yes) (N/A)	
Rental Fee	(Yes) (N/A)	Amount \$ _____
Additional Fees / Schedule Service Appt	(Yes) (N/A)	Amount \$ _____
Email Confirmation Sent	(Yes)	Total \$ _____
Posted on Conference Center Tracking	(Yes) (N/A)	