

NORTH HANOVER TOWNSHIP

(Name of Municipality)

Application for Use of Facilities

APPLICANT: _____

ADDRESS: _____

ADDRESS: _____

Person Responsible:

Name: _____ Title: _____

Address: _____

Telephone: (H) _____ (C) _____ (W) _____

The Applicant requests the use of the facilities listed below:

Name and Location of Facility(ies): _____

For the following purpose:

_____ (State the Purpose)

on the following date(s): _____

Specify the hours of use: From: _____ To _____

Number of people to attend: _____

Will juveniles be present? Yes ___ No ___ If Yes, what ages? _____

If juveniles will be present, the Applicant must submit the names, addresses, and telephone numbers of chaperones prior to event.

Will Alcoholic Beverages be served? ___ Yes ___ No If Yes, who will be serving the alcohol?

_____ If Yes, attach a copy of the liquor license and the liquor liability policy of insurance.

___ Attached

Applicant has received a copy of the **Municipality Use of Facilities Agreement** and agrees to abide by and comply with the terms of that Agreement.

APPLICANT: _____ DATE: _____

Signature

Note: Municipality has the right, in its sole discretion, to deny, limit, or revoke the use of requested facility(ies) when in the opinion of the Municipality the use presents a risk of unreasonable injury to persons or damage to property of the Municipality or others.

Bowers Building	CFO Signature	Date
\$100.00 Resident Fee \$200.00 Non Resident Non Refundable		
\$200.00 Deposit Received		
Release of Deposit:		

Proof of Residency Required

RULES & REGULATIONS FOR JEANNETTE BOWERS COMMUNITY CENTER

USE OF THE SENIOR CITIZENS SIDE OF THE BUILDING IS STRICTLY PROHIBITED

1. The building is used by many organizations and must be maintained and cleaned after each use.
2. All children are to be under strict supervision.
3. All tables and chairs that are used are to be wiped clean and put back in the order in which they were found.
4. Floors are to be cleaned of all food, trash, and craft items.
5. All bathrooms are to be checked for excessive misuse. Toilets and urinals must be flushed, trash baskets emptied, and lights turned off.
6. Any spills from drinks etc. are to be cleaned immediately.
7. Everything used in the kitchen must be wiped clean.
8. Vacuum, broom, and mop are located in the utility closet in the hallway.
9. All garbage is to be put in the trash can and tied up no matter how small. If there is a large amount of trash and the building is being used the following day, please take your trash with you.
10. All recyclables are to be put in the recycle container. If there is a large amount of recyclables and the building is being used the following day, please take your trash with you.
11. Key must be returned to the Chief Financial Officer immediately after use of the building.
12. Failure to follow the above regulations may result in termination of privileges to use the building. In case of rental of the building, you will lose your deposit, as well as any future use of the building.

The undersigned agrees to abide by the above rules and regulations and assumes responsibility for invited guests.

Signature: _____

Date: _____

Use of Facilities Agreement

NORTH HANOVER TOWNSHIP a Municipality of the State of New Jersey, hereinafter referred to as **“MUNICIPALITY”**, hereby agrees to allow _____ *(Name of Person(s) or Organization)*

hereinafter referred to as **“USER”**, to use the facilities listed below:

Name and Location of FACILITY(IES):

hereinafter referred to as **“FACILITY(IES)”**

for _____
(State the Purpose)

on the following date(s): _____

The above **USER** shall inspect the described **FACILITY(IES)** prior to the use of the **FACILITY(IES)** and report any defective, hazardous or dangerous conditions found at the **FACILITY(IES)** to

TOWNSHIP CLERK 609-758-2522 x241 at **MUNICIPALITY**, and **USER** shall
(Name and Tel. Number)

immediately cease the use of the **FACILITY (IES)** until such defective, hazardous or dangerous conditions are remedied. After the use of the **FACILITY(IES)**, **USER** shall immediately report to the **MUNICIPALITY** any and all defects, hazards, damages or dangerous conditions upon or adjacent to the **FACILITY(IES)**.

COVID-19

USER verifies and asserts that all activities conducted at the **FACILITY(IES)** shall be in full compliance with the CDC Guidelines, DOH Guidelines and the State of New Jersey Governor’s Executive Orders applicable to public pools, summer camps, sports leagues, and recreation programs which can be reviewed at:

https://nj.gov/infobank/eo/056murphy/approved/eo_archive.html.

USER shall be responsible for all participants or guests complying with any social distancing or mask wearing requirements of the state or Federal government which are in effect.

Indemnification

USER shall indemnify, save harmless and defend the **MUNICIPALITY**, its elected and appointed officials, its employees, agents, volunteers and others working on behalf of the **MUNICIPALITY**, from and against any and all claims, losses, costs, attorney's fees, damages, or injury including death and/or property loss, expense claims or demands arising out of **USER's** use of the named Facilities, including all suits or actions of every kind or description brought against the **MUNICIPALITY**, either individually or jointly with **USER** for or on account of any damage or injury to any person or persons or property, caused or occasioned or alleged to have been caused by, or on account of, any of the activities conducted by or caused to be conducted by **USER**, or through any negligence or alleged negligence in safeguarding the **FACILITY(IES)**, participants, or members of the public, or through any act, omission or fault or alleged act, omission or fault or alleged act, omission or fault of the **USER**, its employees, agents, volunteers, subcontractors or others under the direction, control or under any contractual relationship with the **USER**.

Insurance

Notwithstanding the indemnification and defense obligations of the **USER**, **USER** shall purchase and maintain such insurance described in the attached schedule and as is appropriate for the type of use and hazards present and as will provide protection from any and all covered claims which may arise out of or caused or alleged to have been caused in any manner from **USER's** use of the **FACILITY(IES)**, whether it is to be used by the **USER**, its employees, agents, volunteers, subcontractors or others under the direction, control or under any contractual relationship with the **USER** or by anyone for whose acts any of them may be liable.

USER shall be required to name the **MUNICIPALITY** as an "Additional Insured" on the **USER's** policy of commercial general liability insurance, and simultaneously with the delivery of the executed *Use of Facilities Agreement*, **USER** shall provide the **MUNICIPALITY** with a Certificate of Insurance indicating that the insurance coverage as described in the attached schedule, and as is appropriate for the type of use and hazards present, has been obtained and that the **MUNICIPALITY** has been designated as an "Additional Insured" where required. On or before the renewal date of said policy, **USER** shall be required to provide the **MUNICIPALITY** with a Certificate of Insurance indicating the continuation of insurance coverage and designating the **MUNICIPALITY** as an "Additional Insured" for the duration of this agreement.

The schedule of insurance and the limits of liability for the insurance shall provide coverage for not less than the amounts listed in the attached schedule or greater where required by law.

Signed by an authorized representative of the **USER** and the **MUNICIPALITY** on

this ____ day of _____, 20____.

USER

MUNICIPALITY

Witness

Witness

Schedule of Insurance*

Notwithstanding the indemnification and defense obligations of the **USER**, the **USER** shall provide at its own cost and expense proof of the following insurance to the "**MUNICIPALITY**":

General Liability including Products & Completed Operations Insurance with a minimum combined single limit of liability per occurrence for bodily injury and property damage of *one million (\$1,000,000) dollars** with a minimum annual aggregate of *two million (\$2,000,000) dollars**.

MUNICIPALITY shall be named as an "Additional Insured".

Failure by the **USER** to supply such written evidence of required insurance and to maintain same for the duration of this agreement shall result in default of this agreement and **USER** shall be prohibited from using said **FACILITY (IES)**.

The insurance companies for the above coverage must be licensed by the State of New Jersey and acceptable to the **MUNICIPALITY**. The **USER** shall take no action to cancel or materially change any of the insurance required under this Contract without the **MUNICIPALITY**'s prior approval. The maintenance of insurance under this section shall not relieve the **USER** of any liability greater than the limits or scope of the applicable insurance coverage.

* Above insurance schedule to be prepared in consultation with your Risk Management Consultant as recommended within the JIF Certificate of Insurance Guidelines. Depending on the use of your **FACILITY(IES)**, your RMC may recommend that "Liquor Liability or Host Liquor Liability" coverage be provided by **USER**. For certain uses, it may be recommended that coverage for "Spectators" and/or "Athletic Participants" be required or that Sports Accident coverage be maintained by the **USER**.

Gather Guard Program

Tenant users may obtain a quote or purchase a policy from Intact Entertainment [Gather Guard]. To obtain a quote or purchase a policy please do so by following the instructions below:

1. Visit the Gather Guard website at www.gatherguard.com
2. Select get a quote and answer a few questions about your event
3. Where prompted, enter the applicable venue ID code provided
4. Complete the application and purchase coverage
5. If further assistance is required please call the Gather Guard help desk at **844-747-6240**, Monday-Friday from **8:00 a.m.** to **8:00 p.m.**

Venue Names and Locations:

- Jeanette Bowers Community Center: 41 Schoolhouse Road, Wrightstown, NJ 08560

Venue Code: 4990-023 or use this link <https://app.gatherguard.com/?v=4990-023>

- Jacobstown Volunteer Fire Co. Hall: 86 Jacobstown-Chesterfield Road, Jacobstown, NJ 08562

Venue Code: 4990-040 or use this link <https://app.gatherguard.com/?v=4990-040>

Additional Insured Name: Township North Hanover, 41 Schoolhouse Road, Wrightstown, NJ 08562