

CHATHAM TOWNSHIP VOLUNTEER FIRE DEPARTMENT

APPLICATION FOR USE OF RIVER ROAD FIREHOUSE

NAME OF PERSON OR ORGANIZATION: _____

ADDRESS: _____

PHONE #: _____

DATE REQUESTED: _____ HOURS: _____

THIS APPLICATION IS MADE FOR THE PURPOSE OF: _____

NUMBER OF PEOPLE EXPECTED TO ATTEND: _____

RENTAL AGREEMENT

IF THIS APPLICATION IS GRANTED, THE NAMED ORGANIZATION OR PERSON WILL BE HELD RESPONSIBLE FOR PRESERVATION OF ORDER IN SAID BUILDING AND LIABLE FOR ANY DAMAGE THERETO OR LOSS OF PROPERTY THAT MAY OCCUR.

THE BUILDING AND PROPERTY IS TO BE LEFT IN THE SAME CONDITION AS BEFORE THE RENTAL. THE NAME OF YOUR HOMEOWNER'S INSURANCE COMPANY AND POLICY NUMBER IS REQUIRED.

SIGNED: _____

NAME: _____
(Please Print)

APPROVED BY
RENTAL COMMITTEE: _____

DATE: _____

RENTAL FEE: \$ _____