CONTROY
USER REQUEST INFORMATION FORM

EMAIL ADDRESS: 
NAME: 
PHONE: 

BLDG.: CONTROY PAVILION
ALCOHOL BEING SERVED: YES [ ] NO [ ]
KITCHEN REQUIRED: YES [ ] NO [ ]
HEAT REQUIRED: YES [ ] NO [ ]

PROFIT [ ] NON-PROFILE [ ]

REQUESTED DATE(S): 
REQUESTED TIME(S): TO
NOTES:

DATE: / /20
ORGANIZATION: 
ADDRESS: 
USE REASON: 
CORRECT ADDRESS TO MAIL REFUND: 

For Office Use only:
FORM(S) SENT – YES [ ] NO [ ]
FORM(S) REC’D – YES [ ] NO [ ]

PLEASE NOTE YOU HAVE 2 WEEKS FROM THE TIME OF THE BOOKING TO RETURN TO OUR OFFICE WITH THE RENTAL PACKET COMPLETED AND FEES TO BE PAID OR YOUR RESERVATION WILL BE CANCELED WITHOUT NOTICE.
Controy Pavilion Located on Beautiful Onota Lake in Pittsfield, Ma.

Application for Use of Controy Pavilion

Instructions: The two-page Application form, the User Request Form, the Release/Hold Harmless Agreement, the License Agreement and Alcohol Permit Request (if applicable) should be filled out and brought along with the Certificate of Insurance, (if applicable), to The Buildings Maintenance Department, 81 Hawthorne Ave., Pittsfield, Ma 01201. Upon approval, a copy of the signed documents will be returned to the applicant. These documents should be in possession of the individual using the facility on the day of the event.
If you have any questions or need additional information contact: Office (413)499-9476

Part I:

Date: ___/___/______ Name of Organization: Sunday Night Group
Mailing Address: Email:
Contact Person: Contact Phone #:

If the activity must be cancelled by this department, who should be contacted? (If different than above?)
Name: Telephone: Fax:

Check all that apply

Type of Organization: □ Non – Profit □ For Profit □ Individual □ Business □
Resident – □ Non-Resident □ City □ State □ Federal □

Type of Activity:
Date(s) Requested: Time Requested: AM □ PM □

Facilities needed:
□ Pavilion only □ Pavilion & Kitchen □ Heat

If Other, please specify:
Total attendance expected - No. Chaperones if Youth Group
Open to the Public - □ Yes □ No Admission Charged? Yes □ No □

Is organization an agency of the Pittsfield, State or Federal Government? Yes □ No □

If Yes, a Certificate of Insurance must be filed with the Building & Grounds Maintenance Department.

□ Note: Insurance must have a minimum limit of $1,000,000 aggregate for general liability (covering bodily injury and property damage combined, and personal injury). Certificate must list the City of Pittsfield as an additional insured.

□ A copy of 501(C) (3) Certificate is required if claiming non-profit status.
Controy Pavilion, Located on Beautiful Onota Lake in Pittsfield, Ma.

Application for Use of Controy Pavilion

It is understood:

1) The user is solely responsible for the fulfillment of the policies as set forth by the Buildings Maintenance Department and the City of Pittsfield.
2) Rental Fee(s) total is an estimate based on information given prior to the use of the facility.
3) Additional charges may result after the use of the facilities.
4) All fees are to be paid at the time of reservation.
5) Any damages sustained to the facility and/or equipment during its use will be considered the responsibility of the renting group or organization. The renting group or organization will be billed for any repairs needed to restore the facility and/or equipment to its original state.

I have provided a Certificate of Insurance as required:  Yes ☐ No ☐

I received and read the Policies for Use of Controy Pavilion: Yes ☐ No ☐

I have received and read the Fee Schedule: Yes ☐ No ☐

I have received, signed and understand the License Agreement to Use City Property: Yes ☐ No ☐

I have received, read and signed the Release/Hold Harmless Agreement: Yes ☐ No ☐

I have received, read and signed the Permit Application for use of Alcohol if applicable: Yes ☐ No ☐

Upon signing this document, I accept responsibility for fee(s), supervision, damage and compliance with the policy and addendums relating to the use as established by the City of Pittsfield.

Date: ____________________________________________________

Signature of Applicant: _________________________________________

Part I: Office Manager

Certificate of Insurance on File in Office: Yes ☐ No ☐

Release/Hold Harmless on File in Office: Yes ☐ No ☐

License Agreement on file in Office: Yes ☐ No ☐

Application for use of Alcoholic Beverages on File in Office (if applicable): Yes ☐ No ☐

Approved: Yes ☐ No ☐ Signature: ___________________________ Date: __________
CITY OF PITTSFIELD
Building Maintenance Department, 81 Hawthorne Avenue, Pittsfield, MA 01201 (413) 499-9476 Office (413) 395-0135 Fax

Release/ Hold Harmless Agreement

I ______________________ a representative from ______________________ does hereby acknowledge that in the course of its use of property owned by the City of Pittsfield, namely The Controy Pavilion located at Lakeway Dr., Pittsfield, Massachusetts 01201, for the purpose of ______________________, on ______. 20 ______. And more particularly by virtue of the presence of its agents, servants, employees and invitees, (hereinafter collectively referred to as renter) in any manner whatsoever shall operate at its own risk on said property of the City of Pittsfield.

For and in consideration of the use of The Controy Pavilion, ______________________ does for itself and on behalf of its agents, servants, employees and invitees, hereby, jointly and severally, remise, release and forever discharge the City, its agents, servants and employees (hereinafter collectively referred to as the "City"), of and from all debts, demands, actions, and any and all claims or demands whatsoever of any kind for damages or injuries to property or person, which may arise by virtue of use of The Controy Pavilion.

________________________ further agrees to defend and indemnify and hold harmless the City from and against any claims of any nature whatsoever and the cost and expense, including, but not limited to, attorney fees and legal costs arising out of any claim in connection with its use of The Controy Pavilion.

Said indemnification shall not include claims arising from intentional malfeasance by the agents or employees of the City of Pittsfield.

Signed Date: ______________

Signed - ______________________ Phone No. - ______________________

Name - ______________________

Address - ______________________
City of Pittsfield
Building Maintenance Department, 81 Hawthorne Ave., Pittsfield, MA 01201 Tel. (413) 499-9476 Fax (413) 395-0135

LICENSE AGREEMENT to USE CITY PROPERTY

I ____________________________, do hereby agree to pay all User fees listed below) for the use of Controy Pavilion on the following date: ________________.

All such fees are payable at the time of booking. Cash or Checks are acceptable. If paying by check, each applicant must supply one check for the Rental Fees made out to the “City of Pittsfield” and must be presented to our office within 2 weeks of the secured reservation date not the date of use or the reservation will be canceled without notice.

I also agree to pay any and all damage(s) resulting from the use of the facility/property on the dates(s) indicated above.

User Fee $  
Kitchen Use Fee $  
Early Opening (before noon) $  
Total Estimated Fees $  

Signed Date: ________________

Signed - __________________________________________
Name - ____________________________________________
Address - __________________________________________
Phone No. - _______________________________________
PERMIT APPLICATION FOR USE OF ALCOHOLIC BEVERAGES AT CONTROY PAVILION

The undersigned hereby applies for a permit to consume beer and/or wine only (no distilled spirits) in the building at Controy Pavilion and agrees to abide by all regulations listed below:

This permit is granted only to the persons who have rented the facility and shall be valid only for the date of such rental.

No alcoholic beverages shall be served to or consumed by any person under the legal drinking age or to any intoxicated person.

The applicant and all present at the facility function hereby release the City of Pittsfield from any claims arising from the use of the above premises and the use of alcoholic beverages.

The applicant and all present at the location hereby agree to indemnify the City of Pittsfield and its officers and employees from any claim brought by third parties as a result of the use of alcoholic beverages at the location. In addition, the City of Pittsfield and its officers, agents and employees shall not be liable for any damages, personal injury or to property relating to or arising from the use of alcoholic beverages.

The permission to use alcoholic beverages may be revoked at any time, with or without cause.

No alcoholic beverages shall be taken outside the pavilion.
No alcoholic beverages will be sold on the premises.

I have read, clearly understand and will abide by the above rules and regulations.

Alcoholic Beverages  Yes  No  (if yes, Special license is required from City Clerk’s Office)

Name of Applicant (please print)  Signature of Applicant

Address of Applicant  Date of Signature

Applicant’s Phone Number  Date of Pavilion Rental

Approved: Yes  No  Date:  

Signature of Manager
## CONTROY PAVILION RENTAL FEE SCHEDULE

### Exhibit A

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<td>Pavilion only</td>
<td>0-50 $100</td>
<td>50+ $150</td>
<td>50+ $125</td>
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<tr>
<td>Kitchen</td>
<td>0-50 $50</td>
<td>50+ $100</td>
<td>50+ $75</td>
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Early opening fee - $15.00 per each hour prior to 12:00 noon may apply

If a Department Employee is requested to be present or is required to be present a Service Fee will be assessed at the applicable Overtime Rate (aprox. $30.00 per hour per person)

All payments shall be made by Check or Cash. If paying by check, the applicant will issue one check for the Rental Fees and made out to the “City of Pittsfield”. 
POLICIES FOR USE OF CONTROY PAVILION

All renters agree to abide by all the rules and regulations pertaining to the pavilion as listed below:

Scheduling of Reservation: No reservation will be taken without full payment within 2 weeks of the time of the booking or the reservation will be canceled without notice.

Fee
Rental of Pavilion is $125. If the kitchen is used there is an additional $75. See Hours of Operation below for additional fees if required by such use.

Insurance
Insurance, if applicable, must have a minimum limit of $1,000,000 aggregate for general liability (covering bodily injury and property damage combined, and personal injury). Certificate must list the City of Pittsfield as an additional insured. The Insurance Certificate must be received by the Maintenance Department at least within 2 weeks of booking.

Hours of Operation
12 Noon to 8:00 p.m.
If earlier hours are required, please note on the application and when reserving.
An additional fee of $15.00 per hour for each hour prior to 12:00 noon may be assessed. All fees are to be paid at the time of reservation.

Cancellation
If you need to cancel your reservation, please notify the Building Maintenance Department as soon as possible and a refund will be issued. No refund will be issued for cancellations called in less than 7 days prior to reservation event.

Alcoholic Beverages
No alcoholic beverages are allowed unless the “Application Permit for Consumption of Alcohol Beverages” is signed and approved.

Pavilion Amenities
Kitchen with gas stove, gas grill and electric oven; refrigerator and freezer, sink and counters
Men’s and women’s handicapped accessible restroom facilities
Picnic tables seating approximately 100

Adjacent Grounds
Volleyball court
Horseshoe pits
Swings, picnic tables and grills
Burbank Park/Onota Lake

Before you leave the Controy Pavilion, please make sure that the following is completed:

- Clean grill, stove, microwave and refrigerator
- Clean all kitchen surfaces
- Wipe down picnic tables
- Sweep floor
- Tie up garbage bags and leave in cans... others will remove bags from the pavilion
- Check green play equipment box and ensure that all equipment is accounted for

If these tasks are not completed or items missing, you may be charged.
APPLICATION FOR A SPECIAL ONE-DAY ALCOHOLIC BEVERAGE LICENSE

Subject to any and all laws, regulations, standards, guidelines and policies of the City of Pittsfield and any state or federal agency, department or body otherwise having jurisdiction and further subject to the specific terms, conditions and restrictions printed or written hereinbelow or attached, permission is hereby granted to:

Event Information:
Event Name: ___________________________ Event Producer: ___________________________
Event Address: ___________________________ ___________________________
Non-Profit Organization / Event: Yes ______ No ______
Starting Date: __/__/____ End Date: __/__/____
Total Attendance Expected: ___________________________
Description of Premise: ___________________________

Time: __:__ AM / PM
Rain Plan: ___________________________

Please check ONE:
____ Beer & Wine ONLY - $15.00
____ All Alcohol - $25.00 - NON-PROFIT ORGANIZATIONS ONLY MAY PURCHASE ALL ALCOHOL LICENSE WITH A VALID 501 (c) (3) FORM

Description of the event:
________________________________________
________________________________________
________________________________________
________________________________________

Primary Contact Information:
First Name: ___________________________ Last Name: ___________________________
Address: ___________________________ ___________________________
City: ___________________________ State: ___________________________ Zip Code: ___________________________
Day Telephone: ___________________________ Cell Phone: ___________________________
E-mail Address: ___________________________
Website: ___________________________

1 certify that I will be responsible for the proper observance of the laws governing the dispensing of such alcoholic beverages.

Signature: ___________________________ Date: ___________________________
I hereby swear under the pains and penalties of perjury that the information I have given is true to the best of my knowledge and belief.

OFFICIAL USE ONLY

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<tr>
<th>Building Inspections</th>
<th>Fire Department</th>
<th>Comm Dev./Parks</th>
<th>Building/Grounds Maintenance</th>
<th>Health Department</th>
<th>Licensing Board</th>
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