

EVENT PERMIT



Ordinance 14-15

WHITE/LAURIE WEDDING/RECEPTION

PERMIT NUMBER:

TMP2017-00193

Date(s) of Event:

January 27, 2018, Wedding Ceremony 4pm-5pm, Reception 5pm-11pm

Property Owner:

LEE COUNTY

Applicant:

LOUIS WHITE

Contact: LOUIS WHITE

Description:

Wedding Ceremony and Reception

Location of event:

131 135 1ST ST W/236/240 BANYAN ST/170 PARK BOCA GRANDE 33921

LOISE DUPONT CROWNINSHIELD HOUSE/***941-716-9117

Will the event be attended by 1000 or more people? No

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event? Yes

Will a bond be posted for this event?

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners Lee County, Florida

County Manager Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Louis White / Alicia Laurie Wedding & Reception at the Louise DuPont Crowninshield House1/27/18



Event Application

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- ▼ USE OF COUNTY PROPERTY PERMIT
- FERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INFORMATION (All Permit Types)		
Title of Event / Name of Production	WEDDING & WEDDING RECEPTIÔN	
Date(s) of Event / Production:	January 27, 2018	
Location(s) of Event:	THE LOISE DUPONT CROWNINSHIELD HOUSE IN BOCA GRANDE	
Name of Applicant:	Louis White	
Applicant Address:	307 Wesleyan Rd. Venice, Fl 34293	
Applicant Phone Number:	910-813-3810	
Contact Person: (If different from applicant)	Colin Tychonski	
Contact Phone Number: (If different from applicant)	941-716-9117	
Email Address:	colintychonski@yahoo.com	
Estimated Attendance:	60 Guests	
Event Description: Include each activity, when activities take place, etc.	Wedding Ceremony 4:00 - 5:00pm Wedding Reception at Crowninshield House 5:00 - 11:00pm Set-up all morning	
Hours of Operation:	All day at Crowninshield House	
STRAP # of Parcel:	14432001000050010	
Owner of Premises*:	LEE COUNTY GOVERNMENT	

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



Fill out the following questions for allpermit types:

further details

What is the Zoning Classification of	the premises? PUBLIC FACILITY
Are any temporary structures to be	installed for the event? Type:
Do you have the appropriate permit	s for the temporary structures? Yes X No
* For a 'Special Event' and 'Use of C indentified, including all parking are	ounty Property' permit, submit a site plan with all proposed facilities and activities as.
Insurance Company Insuring the Ev	ent: USAA
Note: Certificate of Insurance must be sub-	nitted at time of application
Surety Company Bonding this Even	(Name and Address): N/A
Will Vehicles be Used as Part of TI Event?	will Food be Available at this Event? Will Alcoholic Beverages be served/consumed at this Event?
☐ Yes	▼ Yes No ▼ Yes No
If yes, automobile coverage must be included on the certificate of insurance	If yes, products liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:	TBD
Type of Food being Served: Banque	
Section II - USE OF COUNT	Y PROPERTY PERMIT
Organization Sponsoring the Event	. NVA
	s for Solicitation in the County Rights-of-Way:
Name of Charity:	
Address of Charity:	
Phone Number:	
Non-profit certificate/registration	His addition of the company of the c
	ure & Consumer Services §496.405 or proof the organization is exempt from this requirement. §316.2045)
Section III - SALE/CONSUM	IPTION OF ALCHOLIC BEVERAGES PERMIT
Is alcohol being xxxx/consumed on If Yes, then a "Lee County Alcohol Permit" is req	County Property? CONSUMED ONLY X Yes No lired. Only non-profit organizations can sell alcohol on County Property.
Non-profit certificate/registration (Required if alcohol is to be <u>SOLD</u> at the event)	number:

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for



be of Production (choose all	that annivit							
TV Movie or Special	TV Series	/ Pilot	_	TV Comm	ercial		Still Photos	
Public Service Announceme			-	Other: _				
ill any of the following be ne	eded or included*?							
Street Closure	A2 2 2			r Yes	P	No		
Traffic / Crowd 0	Control			Yes	r	No		
Fire or Burning			· ·	Yes		No		
Explosives or Py	rotechnics			Yes		No		
Animals, Large o	or Small			T Yes		No		
Construction of	Any Kind			Yes		No		
Large and/or Nu	merous Vehicles			┌ Yes		No		
Helicopters, Boa	ts, etc.			T Yes	Г	No		
Stunts				Yes		No		
Other				Yes		No		
Special Parking Requirement	re.						,	
Special Parking Requirement	ts:						,	
Special Parking Requirement	ts:							
Special Parking Requirement City or County Services Requ		quipment, facil	ities, e	etc.)				
		quipment, facili	ities, e	etc.)				
Total control of the		quipment, facil	ities, e	etc.)				
City or County Services Requ	uired: (Personnel, e				a Florid	2.40.4	rack the according	a impe
City or County Services Requ	uired: (Personnel, e	nd state record	s on p	roduction i		a to t	rack the economi	c impa
	uired: (Personnel, e required for local a s are not available, p	nd state record	s on p	roduction i	ible.		rack the economi	c impa
City or County Services Required The following information is the industry. If exact figures	uired: (Personnel, e required for local a are not available, p	nd state record please estimate	s on p as clo	roduction i sely as poss	ible. umber o			c impa
City or County Services Requestion The following information is the industry. If exact figures	required for local as are not available, p	nd state record please estimate umber in Crew:	s on p as clo pent in	roduction i sely as poss N Lee County:	ible. umber o			c impa

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

_ Is NA	
Signature of Applicant	Witness
Print Name of Applicant and Title	Colin Tychunski Print Name of Witness
March 15th, 2017	March 15th 2017
Date	Date



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Check the	appropriate	box(es)	below.
-----------	-------------	---------	--------

- F SPECIAL EVENT PERMIT
- □ USE OF COUNTY PROPERTY PERMIT
- ▼ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:	Parking in designate	ed areas only
Deputies (How Many?):	none	
Fee for Services:	none	
Special Arrangements:	none	
	Print Name: Signature: Title:	Capt I Lockhen 92149 Capt I Lockhen 92149 Captan Stel Ops
	Date:	6-7-17



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

∫∑ USE OF CO	OUNTY PROPERTY MIT	PERMIT	
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, P	LEASE INDICATE BELOW WHAT ARRANGEN LY WITH FOR THEIR EVENT.	MENTS YOUR ORGANIZATIO
Fire Guards (How Many?)		None	A CONTRACTOR OF THE PARTY OF TH
Fee for Services:		None	
Flammable Vegetation:		None	
First Aid Equipment:			
		None	
Fire Extinguishing:			
rieniline Appendicular		None	
pecial Arrangements:		In case of emergency - Dial 911	
	Print Name:	C.W. Blosser	
•	Signature:	C.W. DIOSSET	nanimiddenthe
	Title:	Fire Chief	or reconstruction and man
	Date:	06/13/2017	

Page 7



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 14752 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 (239) 533-3911

Check the appropri	ate box(es) belov	W:		
SPECIAL EV	ENT PERMIT			
▼ USE OF CO	UNTY PROPERTY P	ERMIT		
FILM PERM	IIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			WHAT ARRANGEMENTS YOU.	OUR ORGANIZATION
Treatment Facilities:	None necessary.			
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau	rtions necessary.		anning and the second seco
. •				
Fee for Services	Not applicable.			
Special Arrangements:	Please call 911 in the 239 533-3911.	event of an emergency. T	o arrange special event coverage	, contact our office at
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Date: 2017.06.05 13:42:53 -04'00'	
	Title:	Chief		
•	Date:	06/05/2017		,



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the approprie	ate box(es) bel	ow:		
☐ SPECIAL EV	ENT PERMIT		8	
□ USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVER	AGES WITHIN LEE COUNTY	FACILITIES
FILM PERM	IT			
AFTER REVIEWING THE WILL REQUIRE THE APPL			N WHAT ARRANGEMENTS ENT.	YOUR ORGANIZATION
Parking:	Park in designated prohibited.	areas. No event parking on	County maintained road rights-o	of-way where parking is
Ingress and Egress:	Use all established	means of ingress and egres	SS.	
Special Arrangements:	None.	- '		
	Print Name:	Bryan Miller		4 4
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2017.05.31 12:06:45 -04'00'	
	Title:	Senior Project Manager		
	Date:	May 31, 2017	1. 12	



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Chock tho	annrangiata	haufaal f	am force or
CHECK HIE	appropriate	DUXIES) L	ieiuw:

- **SPECIAL EVENT PERMIT**
- ▼ USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

llumination;	No open flames alo	oud on premises. Any additional light	ting must be provided by permit holder.	
Parking Areas:	Use Community Ho	ouse parking lot and existing parking	at the Boca Grande Community Park and Cen	iter
Special Arrangements:	- Must provide insu guidelines set forth - Alcohol must be c - Lee County Parks	rance with Lee County BOCC being a i by the Loise DuPont Crowninshield I contained inside of the Louise DuPoni	t Crowninshield House during the reception. ctor approves this alcohol permit (2 - permits	
	Print Name:	JESSE LAVENDER	Joe Wier	
	Signature:	Joseferh	Joseph R Wier	
	Title:	Director	Supervisor	
	Date:	5/30/17	5/11/17	



LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	e box(es) below:
☐ SPECIAL EVE	NT PERMIT
IX USE OF COU	NTY PROPERTY PERMIT
PERMIT TO S	ELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	r
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
nsurance Requirements:	Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.
	In addition, Host Liquor Liability insurance will be required with minimum limits of One Million Dollars (\$1,000,000) per occurrence. Should Host Liquor Liability coverage be afford under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.
Special Arrangements:	A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured. Subject to proof of insurance,
	Print Name: Mike Figueroa
	Signature:
	Title: Risk Program Manager
	Date: July 3, 2017



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/29/2017

East Main Street Insurance Services, Inc. Will Maddux PO Box 1298			ONLY AND HOLDER.	ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
Grass Valley, CA 95945 Phone: (530) 477-6521 Email: info@theeventhelper.com			INSURERS A	INSURERS AFFORDING COVERAGE				
NAME OF THE PARTY			INSURER A: LIC	INSURER A: Lloyds Syndicate 2623 AA-1128			82%	
	# 16 . 6 . h							18%
		307 Wesleyan Road		INSURER C:				
		Venice, FL 32493		*				
				INSURER D:				
~~1				INSURER E	INSURER E:			
TH AN MA PO	E PO Y RE Y PE LICIE	IGES LICIES OF INSURANCE LISTED BEI QUIREMENT, TERM OR CONDITION RTAIN, THE INSURANCE AFFORDE IS. AGGREGATE LIMITS SHOWN M.	NOF ANY CONTRACT OR OTHER DECRIBED H	OCUMENT WITH R IEREIN IS SUBJECT CLAIMS.	ESPECT TO WHICH TO ALL THE TERM	I THIS CERTIFICATE MAY IS, EXCLUSIONS AND COM	BE ISSUED OR	
INSRIA LTR II	ISRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/OD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)		8	
		GENERAL LIABILITY				EACH OCCURRENCE INCLUDES BOOKY IN JURY & PROPERTY DAMAGE	\$ 1,00	000,00
A	Υ	X COMMERCIAL GENERAL LIABILITY	EH-771316-L1000588	01/26/2018	01/28/2018	MED EXP (Any one person)	\$	5,000
	Ì	X CLAIMS MADE OCCUR	The state of the s		57 17 100 597 100 to 1 C	PERSONAL & ADV INJURY	\$ 1,00	00,000
	ľ	X Host Liquor Liability	ELL 774946 LADDOERO	01/26/2018	01/28/2018	GENERAL AGGREGATE	SALUANNESS SALVANOS S	000,00
	ĺ	GEN'L AGGREGATE LIMIT APPLIES PER:	EH-771316-L1000588	01/20/2010	01/20/2010	PRODUCTS - COMP/OP AGG		UDED
	Ì	X POLICY PRO-				DEDUCTIBLE	\$	1,000
			:	***		nennettore		1,000
		Retail Liquor Liability					\$	
		ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	\$	
		ALL OWNED AUTOS SCHEDULED AUTOS		. Cocomero Applicato		BODILY INJURY (Per person)	\$	
		HIRED AUTOS NON-CWINED AUTOS		a companya de construir		BODILY INJURY (Per accident)	ş	
				exception of the second of the	,	PROPERTY DAMAGE (Per accident)	s	
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	s	
		ANY AUTO				OTHER THAN EA AGG	\$	
						AUTO ONLY: AGG	\$	
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	s	
		OCCUR CLAIMS MADE				AGGREGATE	\$	
		CCCGK CDAINING WADE			1	Madicante	******************	
							\$,
		DEDUCTIBLE					\$	
┝━┼		RETENTION \$				WC STATU- OTH-	3	
	WOR	KERS COMPENSATION AND LOYERS' LIABILITY				WC STATU- TORY LIMITS ER		
		PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$	
		CER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE	\$.	
	SPE	i, describe under CIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$	
	отн	ER		1				
					*	SEAL MAN COL		
Cert	ificate ndane	ON OF OPERATIONS / LOCATIONS / VEHIC a holder listed below is named as additions: pe; 75, Event Type: Weddings and Wad	onal insured per attached CG 20 26 07	04,				
CERTIFICATE HOLDER CANCELLATION								
	Lee County Board of County Commissioners PO Box 398				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL <u>ENDEAVOR TO MAIL</u> DAYS WRITTEN			
				DATE THEREO				
Fort Myers, FL 33902			IMPOSE NO CB	NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLICATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS ACENTS OR				
					AUTHORIZED REPRESENTATIVE WITH Madding			
AC	ORE) 25 (2001/08)			<u>N4</u>		ORPORATION	1988

COMMERCIAL GENERAL LIABILITY CG 20 26 07 04

Policy Number: EH-771316-L1000588

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)				
Lee County Board of County Commissioners PO Box 398 Fort Myers, FL 33902				
Information required to complete this Schedule	if not shown above, will be shown in the L	eclarations.		

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- A. In the performance of your ongoing operations; or
- B. In connection with your premises owned by or rented to you.

Louise DuPont Crowninshield Community House, Inc. PO Box 101 Boca Grande FL 33921-0101

LETTER OF AGREEMENT

					The state of the second	
1.7	XXXXX	-BacksBa	Laboration and Bade		PERMIT REQ	
₹	, vy illi	aicononc	neverages nein	g servea -	PERMIT REC	JUHKED.
				•	 contract de la constitució de la contraction de la co	 Novi (Senza in Second Senza in)

() Without alcoholic beverages being served

THE CROWNINSHIELD HOUSE following person(s) or organization	E agrees to rent certain spec n:	ified facilities in the House to the
Name: Alicia Lauris	2 / Louis Whi	łe
Address: 307 WES	eyan Ra	
City: Venice	State: FL_Zip Co	ode: <u>34293</u>
Phone: 413-444-8884 Propose ** P	ed Function:** Wading lease submit floor plan with	<u>Levenous / Reception</u> usigned agreement.
Date(s): 1-27-18 Ap	prox. Number of Persons A	.ttending: <u>LC</u>
Times: From: 2:00 AMPM	то: <u>II'. 30</u>	_AM(PM)
This Agreement will entitle the Re House facilities during the date(s) a In return, at the time of the signing customary fees for the use of the fa	and time listed above. of this Agreement, the Ren	
Main Room/Kitchen	@ \$ 325.00 Per day	s_325
Plus Sales Tax (6%)	Tax \$19.50	<u>s 1950</u>
Cleanup Fee Required	@ \$ 225.00	s 225_
TOTAL CHARGES		s <u>569.S</u> D