



| | |
|---------------------------|------------|
| AMT REC'D \$ _____ | CK # _____ |
| REC'D BY _____ | DATE _____ |
| DEPOSIT RETURNED ON _____ | \$ _____ |
| BY _____ | CK # _____ |

Town of Leeds
 218 North Main Street
 PO Box 460879
 Leeds, UT 84746-0879
 Phone: 435-879-2447 Fax: 435-879-6905
 E-mail: clerk@leedstown.org // Website: www.leedstown.org

TOWN HALL RENTAL CONTRACT

Please fill in all information. Write N/A, if not applicable.

Organization: _____

Name of Person Responsible: _____

Address: _____

Phone Numbers: Home: _____ Cell: _____

Date(s) desired for use of Town Hall: _____

Time: Start: _____ Finish: _____

For what purpose? _____

Refundable Cleaning Deposit: A Cleaning Deposit of \$100.00 may be required. If Town officials or employees, detect damage to the facilities, or if the facilities are left in an untidy condition that would require more than normal clean-up work, a charge will be levied to recover the resulting costs to the Town. The clean-up will be deducted from the amount of the deposit. If the amount exceeds the deposit, the undersigned will be billed by the Town. If you leave the facilities as you found them your deposit will be returned to you.

Non-Profit Organizations: No rental fee required.

Key issued: _____

Key Returned: _____

I have read the above stipulations and agree to their conditions.

Signature

Date

I have enclosed the following fees:

"Refundable" Deposit \$ _____

Resident Rental \$ _____

Non-Resident Rental \$ _____

Total Amount Enclosed \$ _____

All fees are to be paid in advance and are non-refundable (except deposit, if conditions are met).