

**BUILDING USE FORM**  
**MUNICIPAL OFFICE BUILDING**

Date: \_\_\_\_\_

This form must be submitted to the Office of the Town Administrator/Board of Selectmen at least 14 days prior to requested use date. Mail to:

Office of the Town Administrator/Board of Selectmen  
140 Worcester Street  
West Boylston, Massachusetts 01583

Name of Organization: \_\_\_\_\_

Request permission for the use of the following area(s):

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ On the following

dates: \_\_\_\_\_ from the hours of: \_\_\_\_\_

for the purpose of: \_\_\_\_\_

Furnishings needed: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, be specific \_\_\_\_\_

Number expected to attend: \_\_\_\_\_ Custodian Services Needed? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain

\_\_\_\_\_ If no, person responsible for clean-up and phone

number \_\_\_\_\_

Please check and complete appropriate statement:

\_\_\_\_\_ A. There will be no admission or participation charge.

\_\_\_\_\_ B. There will be an admission or participation charge of \$ \_\_\_\_\_

**I HAVE READ AND UNDERSTAND THE BUILDING USE POLICY ON THE REVERSE SIDE OF THIS FORM AND ACCEPT RESPONSIBILITY FOR MEETING THE POLICY REQUIREMENTS, INCLUDING BILLING OBLIGATIONS, IF THE REQUESTED BUILDING USE IS GRANTED.**

\_\_\_\_\_  
Signature of Authorized Organization

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone #

(Home)

(Business)

**THE TOWN WILL NOT BE HELD RESPONSIBLE FOR ANY ARTICLES LOST, STOLEN OR ANY PERSONAL INJURY**

\*\*\*\*\*

I (approve) (disapprove) this request

Date Received: \_\_\_\_\_

Date Answered: \_\_\_\_\_

\_\_\_\_\_  
Nancy E. Lucier, Municipal Assistant

## **RULES AND REGULATIONS FOR THE USE OF MUNICIPAL OFFICE BUILDING**

1. This application will be signed by a resident of West Boylston who accepts responsibility for actions of the group and agrees to leave the building in the same condition as found or pay for any damage for additional custodian services.
2. Multiple use dates may be listed on one application.
3. Town business takes priority over all requests for use of the building.
4. Organization is responsible for setting up and taking down of all furnishings unless otherwise specified. No audio-visual equipment is available.
5. Available are two meeting rooms; one each men's and ladies' restroom, in front of building only.

### **RESTRICTIONS:**

1. Organizations using the building will not include persons under 18 years of age, unless strictly chaperoned at all times.
2. Area of use limited to sections listed in #5 above.
3. Approval privilege may be canceled if Town functions require use of the building.
4. If no custodial services are requested, the user is responsible for sweeping and mopping floor and folding up tables and chairs in area used and removing trash to the dumpster which is located outside the building. No trash is to be left in the building.
5. Any keys to the building which have been lent to the user must be turned in within seven (7) days after using building.

### **CLEANING OF FACILITY:**

The user shall be responsible for sweeping and mopping of all floors. If custodial services are requested, the fee for such will be \$25.00 per hour with a two-hour minimum. A check for \$50.00 covering such fee is required to accompany the application for building use. Any additional time required will be billed at a rate of \$25.00 per hour.

**If the building is found not to be in a clean condition after your activity, we reserve the right to revoke any permits for future use which have already been issued.**

### **RESERVATION:**

The Town of West Boylston reserves the right to determine what uses of the building are in the best interest of the community, to require specific supervision of an activity or event admitted to the building, and specifically reserves the right to accept, reject, or cancel any building user's privilege or to delegate such power to any responsible official. The Town also reserves the right to waive such fees as it deems appropriate.