



# PALMER CREEK LODGE COMMUNITY EVENTS CENTER

## Use Permit, Application & Reservation Form

City of Dayton

PO Box 339

Dayton OR 97114

(503) 864-2221

[www.daytonoregon.gov](http://www.daytonoregon.gov)

Application for rental of the Dayton Community Center Facility must be submitted in person

Date of Event: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Type of Event: \_\_\_\_\_ Total Hours Requested: \_\_\_\_\_

Hours of Reservation: Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Rooms Requested:  1st Floor Meeting Room  2nd Floor Auditorium  Commercial Kitchen  
 Entire Facility  2nd Floor Lobby (Limited use)  Non-Profit Use  Private Use

Estimated Attendance Numbers: \_\_\_\_\_ Final Attendance Numbers: \_\_\_\_\_

Applicant/Organization Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Non-Profit ID # \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Email Address: \_\_\_\_\_

Authorized Back-up Person: \_\_\_\_\_ Phone # \_\_\_\_\_

*Back-up Person can only pick-up the facility key, attend the walk-through for the applicant & be present at the facility in absence of the applicant.*

**\*\*Deposit refund checks are issued to the named applicant listed on this application and are mailed to the applicant's address.**

### Facility Rental Information:

Will Food or Drinks be served?  Yes  No If yes, you will be required to rent the kitchen for your event.

Will the event be catered?  Yes  No If yes, Caterer's Phone Number: \_\_\_\_\_

Caterer's Name \_\_\_\_\_

Will you be serving alcohol at your event?  Yes\*  No

OLCC Licensed Server Name: \_\_\_\_\_

Will there be a Band?  Yes  No Music/Disc Jockey?  Yes  No - All music must end at 10:00 pm

Will you need use of the facilities tables and/or chairs?  Yes  No

I hereby apply for a Palmer Creek Lodge Dayton Community Events Center Use Permit. I confirm that all the information supplied in this application is true to the best of my knowledge. I understand by signing this document I am agreeing to all the terms and conditions set forth in the Palmer Creek Lodge Dayton Community Center Facility Use & Rental Agreement, in which I have received a copy and have read.

Applicant Signature

Date Signed

**Office Use:**

Application Deadline: \_\_\_\_\_

Application Approved By: \_\_\_\_\_

**CITY OF DAYTON REVIEWERS - CHECK LIST**

- Event scheduled on Community Center Calendar
  - Event scheduled on City's Website
  - Completed Use Permit Application (No blank spaces/signed & dated)
  - Attached Addenda
  - Completed Facility Use & Rental Agreement
  - Copy's given to applicant
  - Payment In Full
  - Applicants Identification - Address Verification
  - Copy attached
  - Insurance Certificate Required:  Yes  No
  - Copy attached
  - Alcohol Serving Requirement
  - OLCC Licensed Server Verification
  - Licensed Server Picture ID
  - Facility Key Card # \_\_\_\_\_ Date Issued: \_\_\_\_\_ Issued by: \_\_\_\_\_
  - Pre-Rental Walk-Through
  - Scheduled Date: \_\_\_\_\_ Time: \_\_\_\_\_
- Rental Comments: \_\_\_\_\_

**RENTAL FEES & DEPOSITS**

Description <small>*2 hour minimum rental required</small>	Private Use			Units	Amount Due	Deposits		
	Dayton Resident	Non-Resident	Approved Non-Profit			Key Card	Security	w/Alcohol
Auditorium *(per/hour)	30.00	45.00	15.00			50.00	150.00	300.00
1st Floor Meeting Room *(per/hour)	30.00	45.00	15.00			50.00	150.00	300.00
1st Floor & Auditorium (together)	60.00	90.00	30.00			50.00	300.00	600.00
plus Kitchen (additional fee)	30.00	45.00	30.00					
Entire Facility Rental	450.00	675.00	225.00			50.00	300.00	600.00
Weekend Rental/Entire Facility	900.00	1350.00	450.00			50.00	300.00	600.00
Kitchen Only (per/4 hour block)	30.00	45.00	30.00			50.00	150.00	300.00
2nd Floor Lobby (per/4 hour block)	30.00	45.00	30.00			50.00	150.00	300.00
Rental Fees Sub Total:								
Deposit Sub Total:								
Total Amount Due:								
Reservation Fee: 50.00								
Total Balance Due:								

**Payment Log**

Date	Amount Paid	Type of Payment	Receipt #	Comments

**After Rental:**

Cleaning Fee:	Damage Fee:	Item(s) Replacement Fee:
Amount Refunded:	Refund Date:	Check #: _____ By: _____