



## Saylor Building Rental/Reservation Form

The Saylor Building has served the residents of the Cattaraugus Territory for decades. It is the desire of the Seneca Nation Department of Education to continue to provide the space within the Saylor Building to community members wishing to use the facilities. Please take a moment to familiarize yourself with the application below. This document will serve as a guideline of agreement for usage of the facilities.

NAME \_\_\_\_\_ DATE SUBMITTED \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ MOBILE PHONE \_\_\_\_\_

DATE OF EVENT \_\_\_\_\_

PURPOSE OF EVENT \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

DEPOSIT - \$50 – returned upon satisfactory completion and inspection attached checklist. \_\_\_\_\_(Initial)

RENTAL - \$75 fee per *time unit* of use - Check payable to **SNI Education - Cattaraugus**

The SNI Department of Education will provide a staff member to open the facility, be available for facility issues that may arise and the lock the facility. Renter is responsible for returning facility to original pre-rental state. The attached checklist is a guideline for areas of inspection.

I would like to rent the following area(s):

**PLEASE CHECK AND INITIAL EACH APPROPRIATE BOX**

DINING ROOM       KITCHEN       GYM       PAVILION

TIME UNITS AVAILABLE:

8:00AM to NOON       NOON to 4:00PM       4:00PM to 8:00PM

AGREEMENT:

I, \_\_\_\_\_, agree to pay the rental fee in the amount of \$\_\_\_\_\_, (equal to \$75.00 X \_\_\_\_\_ *time units* plus \$50 deposit) for the above rental. Upon the satisfactory completion of the attached checklist, the deposit will be returned to me by check issued through SNI fiscal Policy. Please make check payable to \_\_\_\_\_. I further agree to forfeit the Above deposit return upon refusal to restore the rental facility to its original pre-rental state.

SIGNED: \_\_\_\_\_ DATE \_\_\_\_\_

EDUCATION INTAKE STAFF: \_\_\_\_\_ DATE \_\_\_\_\_

CHECKLIST:

A designated staff member from the Department of Education will walk through the check list with the renter following the event. Failure to restore facility to original pre-rental state may result in forfeiture of deposit return outlined above. Both the renter and the designee directly following event must sign checklist.

**KITCHEN:**

**COMMENTS**

- CHECK BOX IF NOT RENTED
  
- FRONT SINKS \_\_\_\_\_
- BACK SINKS \_\_\_\_\_
- STOVE TOP \_\_\_\_\_
- OVEN \_\_\_\_\_
- CHEST FREEZER \_\_\_\_\_
- STAINLESS FREEZER/FRIDGE \_\_\_\_\_
- FLOORS \_\_\_\_\_
- COUNTER TOP \_\_\_\_\_
- STAINLESS TABLES \_\_\_\_\_
- GARBAGE EMPTIED \_\_\_\_\_

**DINING ROOM:**

- CHECK BOX IF NOT RENTED
  
- FLOORS \_\_\_\_\_
- WALLS \_\_\_\_\_
- TABLETOPS \_\_\_\_\_
- CHAIRS \_\_\_\_\_
- GARBAGE EMPTIED \_\_\_\_\_

**GYM:**

- CHECK BOX IF NOT RENTED
  
- EQUIPMENT RETURNED TO CLOSET \_\_\_\_\_
- GARBAGE EMPTIED \_\_\_\_\_
- FLOORS SWEEP \_\_\_\_\_

**PAVILION:**

CHECK BOX IF NOT RENTED

ALL TRASH PICKED UP \_\_\_\_\_

TRASH EMPTIED \_\_\_\_\_

RENTER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RENTER PRINTED NAME \_\_\_\_\_

DEPARTMENT DESIGNEE \_\_\_\_\_ DATE \_\_\_\_\_

PLEASE NOTE THAT THE EDUCATION DEPARTMENT RESERVES THE RIGHT TO DENY RENTAL BY AND PARTY AND DESIGNEE.