COMMUNITY ROOM RESERVATIONS RULES

1. Community Room can be reserved between the hours of 8:00 a.m. to 10:00 p.m.

2. All reservations will be at management discretion, and must be approved by the Site Manager at a minimum of one week in advance.

3. A $50.00 cleaning/damage deposit will be required prior to access to the Community Room, of which $25.00 is refundable upon satisfactory check-out inspection. A check-in and check-out inspection will also be required. Prior to check-out please complete the following:
   - Place all furniture and community room property in the same area as you found them.
   - Vacuum all floor area
   - Wipe down all tables and chairs
   - Dust all furniture
   - Empty all trash receptacles
   - Put away all items used
   - Remove all personal items

4. **NO** Smoking will be allowed in the Community Room.

5. **NO** Alcohol will be allowed in the Community Room.

6. **NO** Pets will be allowed in the Community Room.

7. All activities must be completed by times scheduled.

8. All participants will be required to abide by the House Rules of the property. Tenant reserving the Community Room will be held responsible for the conduct of their household members and guests (invited or uninvited).

9. Any and all damages caused to the Community Room during the reservation will be deducted from the cleaning/damage deposit. Any and all damages exceeding the cleaning/damage deposit will be charged to the Tenant reserving the Community Room.

Community Room use is voluntary and at individuals own risk Kier Property Management/property does not endorse any activity.
COMMUNITY ROOM RESERVATION

I, ______________________________________________, Apartment # ________________,
request to reserve the Community Room for ________________________________
from: _________ A.M/P.M to: _________A.M/P.M.

I understand that I take full responsibility for cleaning and any and all damages that may occur,
and agree to surrender the Community Room in the same or better condition than received. I
also understand and agree to all of the conditions of the Community Room Reservation Rules.

Failure to abide by the terms as stated in the Community Room Reservation Rules and the
property House Rules during my specified reservation period could jeopardize any future use of
the Community Room. I also understand failure to abide by the terms and conditions stated
above may result in lease violation and possible termination of my lease.

Date of Deposit: ___________ Received From: ______________________ Amount: $ _______

___________________________________ ________________________
Resident Name (print) Resident Signature Date

Address & Apartment Number Telephone Number

The Reservation request listed above is Approved / Denied (Circle One)

___________________________________
Date

Reason for Denial (if applicable)

COMMUNITY ROOM INSPECTION

Condition at Check In: ________________________________________________

Condition at Check Out: ______________________________________________

Eligible for Deposit Refund: Yes or No (circle one) Deposit Refunded on:________

If No, explain: ________________________________________________________

Tenant Charges: YES or NO (circle one) Total Tenant Charges: $______________