

ERIE COUNTY TECHNICAL SCHOOL

PROPOSED AGENDA ITEM

DATE: January 27, 2005

SUBJECT: Use of Facility Request

CATEGORY: Operations: X Policy: Information: Personnel:

INITIATED BY: Steven Sceiford Facility Manager

DESCRIPTION:

Alliance of Automotive Providers (AASP) to use the cafeteria on Thursday, January 20, 2005 from 7:00PM – 10:00PM for their monthly meeting.

RECOMMENDATION:

Motion to approve the use of facilities request from the Alliance of Automotive Providers (AASP) to use the cafeteria on Thursday, January 20, 2005 from 7:00PM – 10:00PM.

Eric County Technical School
Buildings and Grounds Use Request Form

Organization Making Request: AASP- Alliance of Automotive Providers
Organization's Event: monthly meeting
Description of Event: Monthly Meeting
Date(s) of Event: 1-20-05
Time Schedule of Event: 7:00 PM 10:00 PM

Sections of Buildings or Grounds to be used:

La Petenca

It is understood that the responsibility and liability of the organization making this request includes, but is not limited to the following considerations:

1. Use of the buildings and grounds on Saturdays or Sundays, while not prohibited, is discouraged. If use of the facility is granted for a Saturday or Sunday, there will be costs in addition to any rental fee that will be assessed at the rate of \$25.00 per hour.
2. All facility use fees and other charges for such use must be paid in full.
3. ~~School-related~~ and Community Service organizations will normally not be required to provide proof of liability insurance, but they will be requested to sign an Indemnification and Waiver of Liability form. Non-profit organizations are required to present proof of public liability coverage with limits of \$300,000 per accident. Profit-making organizations are required to present proof of public liability coverage with limits of \$500,000 per accident. The school's Operating Committee, through the recommendation of the school's Director, may require higher limits of liability insurance for specific and/or unique situations.
4. Understand that the Eric County Technical School will not be held liable for injuries or illness incurred on school property by individuals directly or indirectly associated with the event taking place.
5. Provide adequate supervision to assure proper use and care of the building, grounds, equipment, and furnishings.
6. The organization is responsible for setting up, moving, dismantling, and returning furniture, equipment, and supplies to their proper place. Use of kitchen facilities requires the presence of a representative of the cafeteria staff. Remuneration shall be at the prevailing rate per hour, paid directly to the individual involved in addition to any applicable usage fee
7. The organization is responsible for performing all custodial chores necessary to restore the facility and furniture to the condition in which it was found. A fee will be charged for special or additional set-up services required prior to or after scheduled use.

8. To work cooperatively with the staff member(s) on duty and understand that granting of this request is limited to the facilities and equipment listed on this request form.
9. Bringing onto school property and/or consuming alcoholic beverages or other controlled substances is specifically prohibited.

Fee Schedule

Area	Organization Type			
	School-related	Community Service	Non-profit	For Profit
Classroom	No Charge	No Charge	\$10/hour	\$20/hour
Cafeteria	No Charge	No Charge	\$10/hour	\$20/hour
Corridor	No Charge	No Charge	\$10/hour	\$20/hour
Kitchen	No Charge	No Charge	No Charge	\$25/hour
Laboratory	No Charge	\$10/hour	\$15/hour	\$25/hour
Grounds	No Charge	No Charge	No Charge	\$20/hour
Maintenance Fee (Weekend Use)	No Charge	\$25/hour	\$25/hour	\$25/hour

Other Charges:

Total Amount Due: 0

Organization Name: AASP Alliance of Automotive Providers

Address: 230 W 17TH ST

Telephone: 814-454-8408

Representative's Name: David Lossie

Address: 230 W 17TH ST

Telephone: 814 454-8408

Representative's Signature: David Lossie

Request Approved: Approved

Director's Signature: [Signature] 1/19/05

ISO Form Number: 1300.01.00

Revision Date: April 30, 2004

This is a controlled form. Hard copies of this form are considered uncontrolled.

ACORD TM **CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)
01/18/2005

PRODUCER Great Lakes Insurance Associates 3205 Peach Street Erie PA 16508		(814)456-0498	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Alliance of Automotive Service Providers of PA chapter 22, c/o Lossie's Auto Serv. 230 W 17th St Erie, PA 16502		INSURERS AFFORDING COVERAGE		NAIC #
		INSURER A:		
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS			
A		GENERAL LIABILITY	Q25-2000484	1/20/05	1/20/06	EACH OCCURRENCE	\$ 300,000		
	X	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000		
		CLAIMS MADE				X	OCCUR	MED EXP (Any one person)	\$ none
							PERSONAL & ADV INJURY	\$ 300,000	
		GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$ 300,000		
		X	POLICY			PRODUCTS - COMP/OP AGG	\$ included		
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$		
		ANY AUTO				BODILY INJURY (Per person)	\$		
		ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$		
		SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$		
		HIRED AUTOS							
		NON-OWNED AUTOS							
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
		ANY AUTO				OTHER THAN EA ACC	\$		
						AUTO ONLY: AGG	\$		
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$		
						AGGREGATE	\$		
							\$		
							\$		
							\$		
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER		
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$		
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$		
		OTHER				E.L. DISEASE - POLICY LIMIT	\$		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

Erie County Tech School
8500 Oliver Road
Erie, PA 16509

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Deborah Loney