ERIE COUNTY TECHNICAL SCHOOL

PROPOSED AGENDA ITEM

DATE: March 24, 2005

SUBJECT: Use of Facility Request

CATEGORY: Operations: X Policy: Information: Personnel:

INITIATED BY: Steven Sceiford Facility Manager

DESCRIPTION: Pennsylvania State University – Erie County Coop. Extension to hold a 4-H Cook off and workshop in the cafeteria on Saturday, April 2, 2005 from 8:30a.m.-12:30p.m. and use the facility from 7:30a.m.-2:00p.m.

RECOMMENDATION: Motion to approve the use of facilities request from Pennsylvania State University – Erie County Coop. Extension to hold a 4-H Cook off and workshop in the cafeteria on Saturday, April 2, 2005 from 8:30a.m.-12:30p.m. and use the facility from 7:30a.m.-2:00p.m.

Erie County Technical School
Buildings and Grounds Use Request Form

Organization Making Request: The Pennsylvania State University-Erie County Cooperative Extension
Organization's Event: 4-H Cookoff
Description of Event: 4-H members prepare foods at home and bring them to be judged; workshops

Date(s) of Event: Saturday, April 2, 2005
Time Schedule of Event: 8:30 am - 12:30 pm; use of facility 7:30 am -2 pm

Sections of Buildings or Grounds to be used:

Cafetorium; Eagle's Nest

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.oo 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 Erie 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 when due to the actions or negligence of the User.
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

The undersigned, in execution of this document, does hereby adopt the changes made therein and marked DB in the same manner that the language, as changed, shall constitute part of the original contract executed by The Pennsylvania State University.

Deborah M. Meder
The Pennsylvania State University
Joseph J. Doncsecz / Deborah M. Meder
Assistant Treasurer / Assistant Treasurer

Other Charges:

Total Amount Due:

Organization Name: Pennsylvania State University-Erie County Cooperative Extension

Address: 850 East Gore Road, Erie PA 16509

Telephone: 814-825-0900

Representative's Name: Janice Ronan, Extension Educator

Address: Same

Telephone: Same

Representative's Signature: X Deborah M. Meder 1/11/05 DEBORAH M. MEDER ASSISTANT TREASURER

Request Approved: Approved

Director's Signature: 3/1/05

ISO Form Number: 3300.01.00	Revision Date: April 30, 2004
This is a controlled form. Hard copies of this form are considered uncontrolled.	

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

COMPANY COPY

DATE (MM/DD/YY) 02/19/2004

PRODUCER

THE PMA GROUP
P. O. BOX 604
LEMOYNE, PA 17043-0604

Serial # 13

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.

COMPANIES AFFORDING COVERAGE

COMPANY A	PENNSYLVANIA MANUFACTURERS' ASSN. INS. CO.
COMPANY B	
COMPANY C	
COMPANY D	

INSURED

THE PENNSYLVANIA STATE UNIVERSITY
RISK MANAGEMENT
120 S. BURROWES ST., ROOM 523
UNIVERSITY PARK, PA 16801

COVERAGES

THIS IS TO CERTIFY THAT 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 B Y THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	**GENERAL LIABILITY** [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR [ ] OWNER'S & CONTRACTOR'S PROT	300401-67-36-04-5	03/01/04	03/01/05	GENERAL AGGREGATE PRODUCTS - COMP/OP AGG PERSONAL & ADV INJURY EACH OCCURRENCE FIRE DAMAGE (Any one fire) MED EXP (Any one person)	$ 3,000,000 $ 3,000,000 $ 2,000,000 $ 2,000,000 $ 1,000,000 $
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS				COMBINED SINGLE LIMIT BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE	$ $ $ $
	GARAGE LIABILITY [ ] ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EACH ACCIDENT AGGREGATE	$ $ $
	EXCESS LIABILITY [ ] UMBRELLA FORM [ ] OTHER THAN UMBRELLA FORM				EACH OCCURRENCE AGGREGATE 	$ $ $
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: [ ] INCL [ ] EXCL				[ ] WC STATU-TORY LIMITS [ ] OTH-ER EL EACH ACCIDENT EL DISEASE - POLICY LIMIT EL DISEASE - EA EMPLOYEE	 $ $ $
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

EVIDENCING COVERAGES OF THE PENNSYLVANIA STATE UNIVERSITY AND ITS EMPLOYEES.

CERTIFICATE HOLDER

ERIE COUNTY TECHNICAL SCHOOL
8500 OLIVER ROAD
ERIE, PA 16509-4699

CANCELLATION

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

AUTHORIZED REPRESENTATIVE OF INDEPENDENT INSURANCE AGENCY

Dennis J. Bojarzyk

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