ERIE COUNTY TECHNICAL SCHOOL

PROPOSED AGENDA ITEM

DATE: July 28, 2005

SUBJECT: Use of Facility Request

CATEGORY: Operations: X Policy: Information: Personnel:

INITIATED BY: Steven Sceiford Facility Manager

DESCRIPTION: Thermal "G" R/C Model Club to use grounds and restrooms for their R/C flying demonstrations.

RECOMMENDATION: Motion to approve the use of facilities request from Thermal "G" R/C Model Club for Saturday, August 13, 2005 9:00-5:00PM.

Erie County Technical School
Buildings and Grounds Use Request Form

Organization Making Request: THERMAL "G" MODEL R/C CLUB
Organization's Event: AIR SHOW
Description of Event: FLYING & SHOWING OF MODEL AIRCRAFT

Date(s) of Event: AUG 13 2005
Time Schedule of Event: 9:00 – 5:00

Sections of Buildings or Grounds to be used:

REAR GRASS AREA BEHIND THE SCHOOL / RESTROOMS INSIDE SCHOOL

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 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.
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

$25.00 Per Hour Custodial Fee

Other Charges:

Total Amount Due:

Organization Name: THEMEL "C" R/C CLUB

Address:

Telephone:

Representative's Name: SALVATORE CERRIE C/D

Address: 513 SILLIMAN AVE ERIE, PA.

Telephone: 899-0395

Representative's Signature: Salvatore Cerrie

Request Approved: Approved

Director's Signature: 7/26/05

Certificate of Insurance

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 LISTED BELOW.

NAME AND ADDRESS OF AGENCY/BROKER

THE HARRY A KOCH CO.
P.O. Box 45279
Omaha NE 68145-0279

CERTIFICATE NO: S89

COMPANIES AFFORDING COVERAGE

COMPANY LETTER	**A**	**Westchester Surplus Lines Insurance Company**
COMPANY LETTER	**B**	
COMPANY LETTER	**C**	
COMPANY LETTER	**D**	
COMPANY LETTER	**E**	

NAME AND ADDRESS OF INSURED:

The Academy of Model Aeronautics, Inc. and/or Affiliated and/or Associated Chartered Clubs, Chapters, and Members thereof.
5161 E. Memorial Drive
Muncie, IN 47302-9252

This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time. 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.

CO. LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY PERIOD	LIMITS OF LIABILITY	
A	**GENERAL LIABILITY** [X] COMMERCIAL FORM [X] PREMISES-OPERATIONS [X] EXPLOSION AND COLLAPSE HAZARD [X] UNDERGROUND HAZARD [X] PRODUCTS/COMPLETED OPERATIONS HAZARD [X] CONTRACTUAL INSURANCE [X] INDEPENDENT CONTRACTORS [ ] CLAIMS MADE FORM [X] PERSONAL INJURY [X] OCCURRENCE FORM	SEW776886 This certificate cancels and supersedes any previously issued certificate of insurance under this policy number.	03/31/05 THRU 03/31/06	GENERAL AGGREGATE PER LOCATION PRODUCTS-COMP/OPS AGGREGATE EACH OCCURRENCE	$5,000,000 $5,000,000 $2,500,000
	EXCESS LIABILITY [ ] UMBRELA FORM [ ] OTHER THAN UMBRELLA FORM			BODILY INJURY AND PROPERTY DAMAGE COMBINED	$ $
	WORKERS' COMPENSATION and EMPLOYERS' LIABILITY			STATUTORY $ (EACH ACCIDENT)	

DESCRIPTION OF OPERATIONS/LOCATIONS/SPECIAL ITEMS:

Loc: ERIE COUNTY

Sanction # 1433 for the date(s) AUGUST 13-13, 2005

THERMAL G R/C CLUB / 1211

ADDITIONAL INSURED: THIS INSURANCE IS PRIMARY AND NON-CONTRIBUTING AS RESPECTS TO ANY ADDITIONAL INSURED SITE OWNER.

ERIE COUNTY TECHNICAL SCHOOL
8500 OLIVER RD
ERIE PA 16509

MAILING ADDRESS OF CERTIFICATE HOLDER:

SALVATORE CERRIE
513 SILLIMAN AVE
ERIE PA 16511

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.

DATE ISSUED: APRIL 19, 2005

Larry A Johnson
AUTHORIZED REPRESENTATIVE