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RAY ROBISON COMMUNITY HALL 206 WEST COMMERCIAL RESERVATION APPLICATION

NAME: _____

ADDRESS: _____

MAILING ADDRESS: _____

PHONE: _____

EMAIL: _____

REQUESTED
DATE(S) OF USE: _____

TYPE OF USE: _____

WILL THERE BE ALCOHOL: CONSUMED? Yes No SOUND SYSTEM? Yes No

HOURS OF USE: FROM: _____

TO: _____

***THE CITY REQUIRES A \$150 CLEANING DEPOSIT** WITHIN 10 BUSINESS DAYS OF THE REQUEST IN ORDER TO KEEP THE BOOKING YOU REQUESTED. **FOR SAFETY REASONS NOTHING IS ALLOWED TO BE HUNG FROM THE CEILING. CLEANING DEPOSIT WILL BE FORFEITED IF CEILING TILES ARE DISRUPTED, CLEANING IS NOT COMPLETED, AND/OR COMMUNITY HALL KEY IS NOT RETURNED TO THE DROP BOX AFTER YOUR RESERVATION DATE.**

SIGNATURE OF APPLICANT: _____

COUNCIL APPROVED: ALCOHOL VARIANCE: Yes No

NOISE VARIANCE: Yes No

SIGNATURE OF CITY REPRESENTATIVE: _____

NOTES: _____

Walkthrough performed by city employee prior to event. (checklist on back of application) Yes No Initials _____

Walkthrough performed by city employee after event. (checklist on back of application) Yes No Initials _____

COMMUNITY HALL USAGE RATES

**NON-PROFITS WITH SCHEDULED USE UNDER 3 HOURS WILL BE FREE
CLEANING DEPOSIT STILL REQUIRED (per use or annual deposit on file)**

INITIAL, REFUNDABLE \$150 CLEANING DEPOSIT -----

NON-PROFITS \$44.00 PER DAY + \$2.64 USE TAX -----

CITY RESIDENTS, GROUPS, LOCAL GOVERNMENT \$165.25 + \$9.92 USE TAX --

NON-CITY RESIDENTS, & GROUPS \$330.50 + \$19.83 USE TAX -----

CAPACITY 250 PEOPLE, 21 TABLES, 203 CHAIRS

Total:--

Collected	Date	Initial
\$		
\$		
\$		
\$		
\$		

OFFICE USE ONLY

ITEM TO PERFORM	PRIOR TO EVENT	INITIALS	AFTER EVENT	INITIALS	NOTES
ALL TRASH REMOVED - (STREAMERS, SIGNS, BANNERS, STAPLES, TACKS REMOVED)	<input type="checkbox"/>		<input type="checkbox"/>		
FLOORS SWEEPED (MOPPED AS NEEDED)	<input type="checkbox"/>		<input type="checkbox"/>		
BATHROOMS CLEANED SINK AREA WIPED DOWN FLOORS CLEANED	<input type="checkbox"/>		<input type="checkbox"/>		
KITCHEN CLEANED COUNTERS, STOVE, REFRIGERATOR, SINK AREA WIPED DOWN	<input type="checkbox"/>		<input type="checkbox"/>		
WINDOWS & WINDOWSILLS AS NEEDED	<input type="checkbox"/>		<input type="checkbox"/>		
THERMOSTATS RETURNED TO 60 DEG.	<input type="checkbox"/>		<input type="checkbox"/>		
ALL TABLES AND CHAIRS REPLACED	<input type="checkbox"/>		<input type="checkbox"/>		
ALL DOORS LOCKED	<input type="checkbox"/>		<input type="checkbox"/>		
KEYS CHECKED OUT - RETURNED TO DROP BOX	<input type="checkbox"/>		<input type="checkbox"/>		

ADDITIONAL NOTES:

MAINTENANCE ITEMS:

Contacted Public Works regarding maintenance items on: DATE: _____