

Reserves and Key Bond Form



Name / User: _____

Company/ Club Name: _____

Address: _____

Postal Address (if different): _____

Email: _____

Phone Number: _____ Mobile Number: _____

Name of Event: _____

Reserve Event is being held in: _____ Date of Event: _____

Agreement of Conditions of Use

I _____ (please print) agree to only use the reserve or lake as outlined in the Event Application Form.

A deposit of \$ _____ is payable in advance before the event is authorized.

1. Reserves are to be left in the same state as they were found.
2. All event rules must be complied with.
3. Bond will be refunded after the reserve has been inspected. Please allow 10 working days.
4. The user is responsible for the return of the keys to the issuing officer/office.
5. The lending of keys to a second party is prohibited.
6. A penalty of \$21.00 per working day will be incurred for late return of keys.
7. All gates must be checked and locked when the user vacates the property.

Declaration

I _____ (please print) consent to the collection of the details above by Waikato District Council, for the purpose of administration and programming. This consent is given in accordance with the Privacy Act 1993. I acknowledge my right to have access to this information.

Furthermore, I declare that the information here is true and correct. I agree to abide by the Council's Rules outlined in the Event Application Form. I acknowledge that failure to follow these rules may impact upon future application for use of reserves for events and/or forfeiture of bond.

Applicant's Name: _____

Signed: _____ **Date:** _____

Office use only

Bond Received by _____ on _____ Key issued by: _____ on _____

Bond paid \$ _____ on _____ Key number issued: _____

Receipt number: _____ Key due back: ____/____/____

Application for refund received Yes No Key received by: _____ on _____

Please send this form in internal mail to Service Delivery Administrator. Bond is not to be refunded until the reserve has been checked and signed off by Parks and Facilities this will be arranged by the Service Delivery Administrator.

Reserve Checked by: _____ Date: _____ Inspection Passed Work Required

Remedial Cost: \$ _____ Details of any deposit retained _____

Refund details sent to P & R on _____ Bond amount refunded \$ _____ on _____

Refund returned Signed by _____