

# SAFETY COMPLEX COMMUNITY ROOM REQUEST

DATE OF REQUEST: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_

REQUESTED DATE (S) FOR USE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TIME (S): \_\_\_\_\_

I \_\_\_\_\_ agree to assuring that the multi-purpose room at the  
Print Name  
Safety Complex will be cleaned and left in an orderly fashion. I agree that if the room is  
not left clean and orderly that I will be responsible for any and all cost to restore the  
room. \_\_\_\_\_

Signature

Date

**Approved by:**

**Bruce Phillips**  
**Fire Chief**

\_\_\_\_\_  
**Date**

**Edward Picard**  
**Police Chief**

\_\_\_\_\_  
**Date**

**William Herman**  
**Town Administrator**

\_\_\_\_\_  
**Date**

**PARKING:** Parking will be in the front of the building away from the Safety Complex.  
If additional parking is needed the gravel parking lot to the left of the Safety Complex  
shall be used. **NO PARKING AGAINST THE BUILDING**