

BUILDING REQUEST FORM

(This is not a Contract)

The process of rental proceeds as follows: (1) Complete Form, (2) IV Expo office-verifies availability; provides quote, (3) customer corresponds with acceptance and (4) IV Expo office issues a rental agreement.

NAME (first, last) _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____ PHONE _____

TYPE OF EVENT Reception Reunion Birthday Prom Quinceñera Baby Shower

Other _____

BUILDING(S) Casa de Mañana Plaza de Culturas Hulsienda Lifestyles Preble Board

Room

Other _____

SETUP DATE(S) _____ SETUP HOUR(S) _____

EVENT DATE(S) _____ EVENT HOUR(S) _____

EXPECTED ATTENDANCE _____ INSURANCE (Required) Purchasing (OR) Providing

Certificate **FOOD** Providing Selling **ALCOHOL** Yes No Selling **MUSIC** Yes No **PA**

SYSTEM Yes No

TECHNICIAN NEEDED Yes No **PIPE & DRAPE** Yes No **AMOUNT NEEDED** _____

TABLES Banquet (6'-seats 6) Rounds (6'-seats 8) Rounds (5'-seats 6 limited to 12) Other _____

OF TABLES _____ **# OF CHAIRS** _____

PARKING North South Other _____

OTHER EQUIPMENT TO

RENT _____

ENTRANCE GATE North South Stock Pit OTHER _____ **TIME** _____

ADDITIONAL INFORMATION _____

SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY

ARRIVAL TIME _____

DEPARTURE TIME _____

STAFF SCHEDULE Yes No

DEPOSIT PAID _____

RECEIPT # _____

BALANCE PAID _____

RECEIPT # _____

INSURANCE Yes

DATE PROVIDED _____

HAZARDOUS Yes No

PURCHASE CFSA Yes No

CONTROL # _____

HEALTH PERMIT NEEDED Yes No

DATE _____

BUILDING PREPARTION Yes

DATE _____

CONTRACT SIGNED BY CUSTOMER

Yes DATE _____

CONTRACT SIGNED BY IVE Yes

DATE _____

LAYOUT PROVIDED TO STAFF Yes

DATE _____

MAINTENANCE STAFF SCHEDULED

Yes DATE _____

WHICH RESTROOMS TO OPEN

SECURITY Yes No

SECURITY SCHEDULE Yes

DATE PROVIDED TO SUPERVISOR

POST DATE REVIEW COMPLETE Yes

DATE _____

DEPOSIT RETURNED Yes

DATE _____