

CLIPPER ROOM LEASE AGREEMENT

This lease agreement is made and entered this ____ day of _____, 20____ at Hammond, Indiana, by and between the Hammond Port Authority, a municipal corporation, hereinafter referred to as “lessor,” and _____, hereinafter referred to as “lessee,” for the lease of the banquet space, commonly known as the “Clipper Room,” situated on the second floor of the Harbor Pavilion Building, Hammond Marina, 701 Casino Center Drive, Hammond, Lake County, Indiana.

Lease Term. Lessee shall have and hold the premises from _____ at ____m. until _____ at ____m.

Rent. Lessee shall pay to Lessor a net rent in the amount of _____ (\$ _____) for use of the above described banquet space during the Lease Term.

TERMS AND CONDITIONS

Holding Deposit. A non-refundable and non-transferable holding deposit in the amount of one hundred dollars (\$100.00) is due and payable on the execution of the Agreement. This deposit will be applied toward the rental balance. _____(Initials)

No Defacement of Premises. Said lessee shall not injure or in any manner deface said premises, and shall not cause or permit anything to be done where by the said premises shall be in any manner injured, marred or defaced, nor shall lessee drive or permit to be driven, any nails, hooks, tacks or screws in any part of said premises, nor shall lessee make or allow to be made, any alterations of any kind therein. If said premises or any portion thereof, during the terms of this lease, be damaged by or through the negligence of the lessee, or of the lessee’s agent, employee, or employees patrons, or any person or persons admitted to said premises by said lessee, the lessee will pay to the lessor, upon demand, such sum as necessary to restore said premises to their former condition. Lessee hereby assumes full responsibility for the character, acts and conduct of all persons admitted to said premises, or any portion thereof, by or with the consent of said lessee, or by or with the consent of lessee’s employees or any person acting for on behalf of the said lessee. _____(Initials)

Final Payment – Full payment is due on or before the day of the Lease term. Final payments will be accepted in the form of money order, cashier’s check, certified check or major credit card. _____(Initials)

Cancellation Policy – Notice of cancellation must be given 48 hours in advance of the event date. Failure to give 48-hour notice will result in Lessee being charged full amount.

Use. Lessee shall use and occupy the Clipper Room solely in accordance with the rules and regulations of the Hammond Port Authority. On execution of this Agreement, Lessee acknowledges having received a copy of the rules and regulations of the Hammond Port Authority and to have read and understood those rules and regulations.

Number of Guests may not exceed the number designated by the Hammond Port Authority at time of execution of this Agreement. Violation of this may result in loss of equipment/cleanup deposit.

Alcohol Service will be provided solely by the Hammond Port Authority. Violation of this may result in loss of equipment/cleanup deposit. Minimum bar total is \$200.00. If total is not met at close of function, the Lessee must pay difference. Security and Bartender fees apply. Please refer to the fee schedule for additional bar fees. _____(Initials)

Cancellation. A written cancellation request from the Lessee to the Marina Director is required twenty (20) business days prior to the first date of the Lease Term. Upon receipt of the request, the Marina Director may return deposits, if applicable.

Costs and Expenses. Lessee shall pay to the Lessor all costs and expenses, including reasonable attorneys' fees, incurred by Lessor in any action or proceeding to which Lessor may be made a party by reason of any act or omission of Lessee.

Entire Agreement. This Agreement sets forth all of the promises and agreement between Lessor and Lessee concerning the leased premises.

Applicable Law. The laws of the State of Indiana shall govern the validity, performance, and enforcement of the Lease.

RENTAL FEE _____
RECEIPT # _____
BALANCE _____

LESSOR:
HAMMOND PORT AUTHORITY
BY: _____

LESSEE:
BY: _____

Printed Name: _____

Address: _____

Telephone _____

I have read and understand the Clipper Room Lease Agreement and Rules and Regulations. _____ (Initials)
