

Renter Contact: _____ Date: _____

Facility: _____

City Equipment Used: _____

Complete a walk-through BEFORE and AFTER the event with Facility Staff.

Indicate with a checkmark that you completed the required service each of the following areas:

	BEFORE	AFTER
✓ Garbage, debris, and recyclables are picked up from inside and outside the facility, sealed in plastic bags, and deposited in dumpsters, including cigarette butts.	☐	☐
✓ Furnishings are returned to their original location including chairs, tables, trash cans, etc.	☐	☐
✓ Tables and chairs are clean and properly stored.	☐	☐
✓ Kitchen countertops and sinks are wiped down and cleaned.	☐	☐
✓ Microwave/Refrigerator/Oven empty and cleaned of all food spills	☐	☐
✓ Floors are clean (vacuumed and/or swept and mopped with clean hot water) and janitorial equipment is returned to its original location.....	☐	☐
✓ Decorations are removed (including tape used to secure them)	☐	☐
✓ Personal belongings are removed from the facility	☐	☐
✓ Equipment is clean, in working order and properly stored (where applicable)	☐	☐
✓ Doors are locked and secured.	☐	☐

Comments regarding the condition of the facility or equipment before and/or after the rental: _____

Renter may be required to pay costs incurred to repair any damage to facility or equipment, including replacement costs. Renter is also responsible for the costs of any additional cleaning required which will be assessed at a rate of \$110/hour. Repair, replacement, and cleaning costs may be charged to the credit card on file. Renter will be notified of any additional charges assessed. Any such additional charges are due immediately upon notification.

I have completed a walk-thru of the facility and performed the tasks stated above. Everything has been left in good order, as it was found, except as noted above. By our signatures below, we acknowledge the cleanliness and condition of the facility and equipment after the rental group activity.

Renter **Sign-In** Signature: _____ Time-In: _____

Renter **Sign-Out** Signature: _____ Time-Out: _____

Facility Staff Signature: _____ Time-In: _____ Time-Out: _____

 For alternate formats, interpreters, or reasonable modification requests please phone at least 48 hours in advance 425-452-6914 (voice) or email ParkRental@BellevueWA.gov. For complaints regarding modifications, contact City of Bellevue ADA, Title VI, and Equal Opportunity Officer at 425-452-6168 (voice) or email ADATitleVI@BellevueWA.gov.