## CENTRAL CALIFORNIA CONFERENCE OF SEVENTH-DAY ADVENTISTS LEASE AGREEMENT APPLICATION FOR CHURCHES & SCHOOLS Please complete EVERY section on this sheet.

|  | 1 10400 0011   |                     |                         |  |
|--|----------------|---------------------|-------------------------|--|
| LANDLORD INFORMATION (FACILITY TO E  | BE USED)       |                     |                         |  |
| Church/School Name   |                |                     | Phone                   |  |
| Contact Person Name  |                |                     |                         |  |
| Church/School Address  |                |                     | County                  |  |
| Representatives (2) Name   |                |                     | Title                   |  |
| Name   |                |                     | Title                   |  |
| Our churches and schools annually apply for property tax-exempt status. Allowing use by for-profit entities may jeopardize your tax status.  |                |                     |                         |  |
|  |                |                     |                         |  |
| TENANT INFORMATION (ORGANIZATION   | WISHING TO USI | E FACILITY) Legal   |                         |  |
| Organization Name  |                |                     | Phone                   |  |
| Contact Person Name  |                |                     |                         |  |
| Address for Correspondence   |                |                     |                         |  |
| Proof of 501 (c) (3) status and insurance must   |                | ••                  |                         | D Number                                     |
| File a Religious or Welfare exemption form w   | •              |                     | -                       |  |
| Representatives (2) Name   |                |                     |                         |  |
| Name   |                |                     | Title                   |  |
|  |                |                     |                         |  |
| CERTIFICATE OF INSURANCE must be provided to show general liability insurance. <u>Policy requires the Insurer be rated A Class VII or better by</u><br><u>A.M. Best</u> and name the Central California Conference of Seventh-day Adventists, 2820 Willow Ave., Clovis, CA 93612, as Certificate Holder and<br>additionally insured to cover the limits of at least \$2,000,000.00 bodily injury and property damage combined limits, \$2,000,000.00 for each<br>occurrence, and \$2,000,000.00 aggregate. |                |                     |                         |  |
| AGREEMENT INFORMATION  |                |                     |                         |  |
| CONTRACT DATES: From   |                | _To                 | (Up                     | to one year term only, may not be backdated) |
|  |                |                     | per month. DEPOSIT \$:  |  |
| ROOM(S) TO BE USED   | SQ. FT.        | DAY(S) TO BE        |                         | TIME OF DAY FOR USE                          |
| KOOM(S) TO BE USED   | <u>30.111.</u> | <u>DAT(3) TO DE</u> |                         | TIME OF BATTOR OSE                           |
|  |                |                     | <u>.</u>                |  |
|  |                |                     |                         |  |
|  |                |                     |                         |  |
| OTHER INSTRUCTIONS   |                |                     |                         |  |
|  |                |                     |                         |  |
| CHURCH/SCHOOL BOARD MEETING ACTION DATE of approval for shared use. This must be an action taken during a church board meeting within one year of the desired beginning contract date. Please include a copy of the board minutes with application submission.   |                |                     |                         |  |
| LANDLORD SIGNATURES  |                |                     | <b>TENANT</b> SIGNATURE | \$   |
|  | Data           |                     |                         |  |
|  |                |                     |                         |  |
|  | Date           |                     |                         | Date   |
|  |                |                     |                         |  |

Please send this completed application, board minutes, insurance certificate, and Tenant's proof of non-profit status to propandriskmgmt@cccsda.org. PLEASE DO NOT ALLOW YOUR FACILITY TO BE USED UNTIL THIS PROCESS IS COMPLETED.