

TOWN OF MCCLELLANVILLE, SOUTH CAROLINA

MUNICIPAL FACILITY USE AGREEMENT

405 Pinckney Street  
McClellanville, SC 29458

[mcclellanville@tds.net](mailto:mcclellanville@tds.net)

Phone (843) 887-3712

Fax (843) 887-3094

1. Facility Requested (Check One)

\_\_\_\_\_ Government Services Building

\_\_\_\_\_ Municipal Grounds

\_\_\_\_\_ Other \_\_\_\_\_

2. Name, Address, Telephone Number of User:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Date/Time Requested: \_\_\_\_\_, 20\_\_\_\_\_  
From: \_\_\_\_\_ (AM/PM) To: \_\_\_\_\_ (AM/PM)

4. Purpose of Use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Describe any alterations or modifications required to accommodate the purpose of the use: \_\_\_\_\_  
\_\_\_\_\_

6. Liability Insurance:  
Name and Address of Company: \_\_\_\_\_  
Limits of Liability: \_\_\_\_\_  
Insured: \_\_\_\_\_

Attach a copy of declaration sheet.

**The Town of McClellanville must be shown as an additional insured. The Town must also receive a copy of the Certificate of Liability directly from the insurer via email, fax or mail.**

7. Alcoholic Beverage Liability Insurance (if applicable):

Name and Address of Company: \_\_\_\_\_

Limits of Liability: \_\_\_\_\_

Insured: \_\_\_\_\_

8. Cleaning Deposit:

\_\_\_\_\_ Yes                      Amount: \$200.00

\_\_\_\_\_ No

9. You will also be required to provide portlets for your outdoor event. Portlets should be delivered and picked up as close to the event date as possible. Please check with town staff regarding portlet placement.

The use of municipal facilities shall be in accordance with the attached policies, as applicable, unless otherwise specified by the Town of McClellanville. The execution of this document by the undersigned user constitutes agreement to comply with the attached policies, as applicable.

\_\_\_\_\_, 20\_\_

\_\_\_\_\_  
User (Individual or Entity)

By: \_\_\_\_\_

Its: \_\_\_\_\_

Approved by Town Council: \_\_\_\_\_

Additional Conditions: \_\_\_\_\_

\_\_\_\_\_