

To be completed by applicant or their representative

Name:

Address:

Venue:	Phase V pool	<input type="checkbox"/>	Sandyport Drive 43 pool	<input type="checkbox"/>	Clipper Island pool	<input type="checkbox"/>
	Roberts Isle pool	<input type="checkbox"/>	Roberts Isle recreation	<input type="checkbox"/>	Playground	<input type="checkbox"/>
	Governor's Cay pool	<input type="checkbox"/>	Governor's Cay recreation	<input type="checkbox"/>		<input type="checkbox"/>

Date of event:

From:

until:

Home #:

Cell #:

I have read and understand the Guidelines as published in the Owner Guide. All garbage, tape, staples, strings, decorative materials should be removed from the area which should be left as found. Failure to produce a valid receipt will result in forfeiture of your deposit.

Sign

Date

Contact Security Services to inspect the venue before and after the event and return the completed form to the Administration Office for processing of the deposit refund if the condition of the venue is satisfactory.

Deposit amount \$:

Date received:

Received by:

Signature:

Condition report before event to be completed by Security Services

Inspected by:

Time:

Notes:

Condition report after event to be completed by Security Services

Inspected by:

Time:

Notes:

Refund

Rejected

☐

Approved

☐

Reason:

Date:

Signature: