

VILLAGE GLEN PLACE CO-OPERATIVE HOME INC.

COMMON ROOM RENTAL POLICY

Name:

Unit Number: Phone Number:

Date room is being used:

Key will be picked up from Unit on (Date) Time

Key will be returned to Unit on (Date) Time

I understand by signing this form I agree to the following conditions:

- a) Only members can fill out this form and rent the common room.
- b) The member will adhere to the dates and times filled out on this form. If there is a change, the member is to inform the key holder and/or the office as soon as possible.
- c) Booking the common room is on a first come, first serve basis. Co-op functions and board meetings have priority. Deposit of \$25.00 must be paid to the staff when booking the room.
- d) All events in the room will cease at 11:00pm Sunday through to Saturday.
This rule is strictly enforced and failure to comply may result in future bookings being denied.
- e) The member signing this agreement must be in attendance of the event.
- f) I understand that if I lose the keys, my account will be charged **\$100.00** for replacement.
- g) I understand that I am responsible for all my guests that use the room with me and if there is any damages to anything, I will be held accountable.
- h) I understand that I am not to move, or tamper with the refrigerator/freezer, storage cabinet, locked cupboard or cameras while in the room.
- i) I understand that I have to leave the room in reasonably clean condition after use, in similar state as it looked when I picked up the key. Failure to do so will result in a charge to my account for cleaning which will include the fridge, stove and bathroom. When returning the key, the room will be checked and the member j) will have a chance to correct at that time, before charges occur. I must take all my garbage/recycling.
- k) Under no circumstances is the sale/use of alcohol permitted in the common room.
- l) Members are reminded that there are other members living around and above the meeting room and are to be respectful regarding noise and behavior.
- m) Any breach of this agreement may result in the member being denied use of the room in the future, at the discretion of the Board of Directors.
- n) Cancellation made 48hours in advance of the event date will receive a 100% refund of their deposit.

Member signature

Date

Village Glen Cooperative Homes Inc.

Keys Policy

PURPOSE

To protect member's security, members privacy and to protect the integrity of the building from damage in case of emergencies, flood, inspection, personal injury or death of a member
To provide direction for action when there is a possible need for emergency entrance into a unit due to a suspicion that the member is in danger or the member is in need of assistance.
This policy is designed to enable the co-op to do this in a manner that meets all requirements.
Every effort must be made to balance the member's rights to privacy with concern for member health and safety within the unit.

KEYBOX

The co-op will keep a unit master key in a key box in the office and locked at all times.

MANAGEMENT has access to the office. Board and Maintenance staff has no access to the office.

MAINTENANCE STAFF: Will be provided with a master key.

The Board will be allowed to make security decisions and or changes anytime to change the keys or lockbox.

BOARD OF DIRECTORS: Each Director will be given a key to the common room, outdoor shed and alarm key only. Keys must be return if director no longer on the Board.

The Staff *MAY NOT* open a unit door for short term guests, long term guests, significant other, relative, service provider or neighbor.

Staff must be contacted or in case of an emergency, the proper authorities must be alerted to the need to investigate the unexplained absence of a member in numerous ways, such as:

1. Suspicion that the member may be in danger
2. History of illness that would increase member vulnerability
3. Full mailbox and/or newspapers piled at the door
4. An overpowering foul smell from the unit

PASSED by the Board of Directors on the _____ day of _____, 20____.

CONFIRMED at a general meeting of the Members on the _____ day of _____, 20____.

President

c/s

Secretary