



**Office of the City Clerk  
City of South Lake Tahoe  
City Council Chambers Rental Application and Rental Agreement**

Name of Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date(s) requested: \_\_\_\_\_ Time: \_\_\_\_\_ to \_\_\_\_\_

Meeting Title: \_\_\_\_\_

**General Information:**

- The Chambers are available to rent Monday-Friday 8-5 p.m.
- The physical address of the Council Chambers is 1901 Lisa Maloff Way, South Lake Tahoe, CA 96150. It is located off US Hwy 50 inside the Lake Tahoe Airport.
- The maximum room occupancy is 112. There are approximately 50 chairs set in theatre style and a dais that seats nine persons. The meeting room is ADA compliant.
- There are no phones located in the Council Chambers.
- For copy and/or fax services while using the Council Chambers, please use one of our local businesses that provide those services.
- Use of audio/visual shall be considered upon advance request to the City Clerk's Office, **72 hours** prior to use of the Chambers. Specifics regarding the system requirements will be provided at that time.
- **Any questions while using the chambers should be directed to the City Clerk's Office by dialing 6005 or 6004 from the white courtesy phone located in the reception/lobby area.**

**Agreement:**

- ***It shall be understood that City Council meetings take precedence over any and all reservations and notice will be given at the earliest possible time should the need arise for use by the City Council (i.e., special or emergency meetings)***
- The undersigned is responsible for restoring all furniture and equipment to their original location and general clean-up of the Chambers.
- The undersigned is responsible for any and all damage that may be caused during the use of the Council Chambers.
- The City will be held free and harmless from any and all liability claims that may occur during the use of the Council Chambers as a result of the activities of the applicant.

- The City is **not** responsible for any lost or stolen items.
- The authorized fees adopted by the City Council are: **\$25** Non-Refundable Application Fee and **\$40.00** per hour room fee.
- **Cancellation Policy** – All cancellations must be received in writing within 72 hours of your room rental. Cancellations not received within this timeframe will be charged the full rate of the room rental listed above.
- You will receive an invoice from the City’s Accounting Division after the meeting date. Payments may be made by Credit Card Authorization or by check made payable to: **City of South Lake Tahoe.**
- This agreement must be completed, signed, and returned to the City Clerk’s Office along with the \$25 non-refundable application fee, prior to use of the Council Chambers.

**I have read the Council Chambers Meeting Facility Rental Agreement and agree to abide by the conditions set forth.**

**Name of Authorized Applicant:** \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

Return City Council Chamber Rental Agreement and Credit Card Authorization to:

Susan Blankenship, Elected City Clerk  
[sblankenship@cityofslt.us](mailto:sblankenship@cityofslt.us)  
 (530) 542-6005  
 Joanne McDonough, Assistant City Clerk  
[jmcdonough@cityofslt.us](mailto:jmcdonough@cityofslt.us)  
 530) 542-6004

1901 Lisa Maloff Way, Ste. 206  
 South Lake Tahoe, CA 96150  
[www.cityofslt.us](http://www.cityofslt.us)

**For City Use Only:**

**Application Received and \$25 Application Fee Processed:** \_\_\_\_\_

**Application Approved: Yes \_\_\_ No \_\_\_ By:** \_\_\_\_\_



# City of South Lake Tahoe

*"making a positive difference now"*

## One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize City of South Lake Tahoe to make a one time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

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### Please complete the information below:

I \_\_\_\_\_ authorize **City of South Lake Tahoe** to charge my credit card  
(full name)  
account indicated below for \_\_\_\_\_ on or after \_\_\_\_\_. This payment is for  
(amount) (date)  
\_\_\_\_\_.

Billing Address \_\_\_\_\_

Phone# \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

|   |
|---|
| Account Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Discover |
| Cardholder Name _____   |
| Account Number _____  |
| Expiration Date _____   |
| CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____   |

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.