

# MUNICIPALITY OF OKAHANDJA



## AGREEMENT FOR THE LEASE OF THE TOWN HALL/SOCCER FIELD

NAME OF APPLICANT.....

ADDRESS..... TEL.....

NAME AND ADDRESS OF RESPONSIBLE PERSON DURING PERIOD OF LEASE:  
.....

NATURE OF FUNCTION FROM ..... UNTIL.....

I/We undertake to inspect the furniture and equipment leased in the presence of the caretaker to establish whether any damages or defects exist and I/We declare herewith that I/We assume full responsibility for any damage which might occur while the hall/ soccer field with furniture and equipment are leased by me/us.

I/We undertake to comply with the provisions of the public hall regulations (3) and to abide by any instructions given by the custodian in the execution of his/her duties.

I/We undertake to pay any shortfall on the deposit paid on the use of the public hall/soccer field or the equipment to the council if such extra amount is needed to replace or repair any furniture or equipment which have been damaged as well as any damage done to the building during my/our lease thereof.

I/We undertake to pay off the Council for any damage which the Council may suffer on account of any claims or actions instituted by any person on the grounds of any damages or losses resulting from the lease of the public hall/ soccer field by me/us.

I/We undertake to vacate the public hall/ soccer field at ..... on the date my/our lease expires and when on a Saturday, not later than 24h00.

I/We undertake to hand over the public hall/ soccer field in the same clean and tidy condition as it was on the day it was allocated to me/us.

I/We admit that I/We am/are aware with contents of this agreement and the public hall/soccer field regulations and that I/We understand its purpose and meaning.  
I/We shall hand over the keys at 08h00 sharp on the date..... After an inspection with an officer of the Municipality, before I/We can claim any deposit of N\$.....

.....  
APPLICANT RESPONSIBLE PERSON DATE

.....  
OFFICER (LEASEE) Signature DATE

**FOR OFFICE USE ONLY**

**A. APPLICATION APPROVED BY:**

1. Administrative Officer.....

Signature .....

Date.....

Applicant.....

Date.....

**B. COLLECTION OF RENTAL AND DEPOSIT:**

Rental: N\$ .....

Receipt No.....

Deposit: N\$.....

Cashier.....

**C. REFUND OF DEPOSIT**

1. No claim on deposit.

2. Claim on deposit as follows

.....  
.....  
.....  
.....  
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.....  
Finance Officer

.....  
Signature

.....  
Date