

FACILITY SALES RECEIPT

Receipt # 2398266
Payment Date: 04/07/2026
Household: 21968
Hm Ph: (901)301-1257

CYPRESS LAKES HOMEOW
1071 NW 110TH LANE
CORAL SPRINGS FL 33071

C.S. Gym
2501 Coral Springs Drive
Coral Springs FL 33065
Phone: (954)345-2200

Reservation Details: Veteran's Building, Veteran's Building

Address: 2503 Coral Springs Drive, Coral Springs, FL, 33065
Reserv. Contact: Cypress lakes homeow
Phone Number: (901)301-1257
Reserv. Number: 157936
Status: Firm
Purpose: HOA Meeting
Anticipated Count: 20

		<u>New Fees</u>	<u>Total Fees</u>	<u>New Paid</u>	<u>Total Paid</u>	<u>Amount Due</u>
<u>Date(s) And Times</u>						
Tue 04/14/2026 6:00P to 9:00P		63.33	63.33	63.33	63.33	0.00
		<u>Amount</u>	<u>Count</u>	<u>Discount</u>	<u>Sales Tax</u>	<u>Total Fee</u>
Fee Details:	Fee Description					
	Meeting (MAX 3HRS/2XMonth)	47.90	1.00	0.00	0.00	47.90
	Admin Single use fee	15.43	1.00	0.00	0.00	15.43

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Facility Comments

DN Alcohol is permitted if patron meets the following: -Must hire a Coral Springs Police Officer Detail; Aniece Banton CSPD 954-346-1313 & attach the receipt to permit. -In addition to detail officer, the patron must purchase liability insurance for their event-1 million liability naming City as additional insured and certificate holder.

DN Any vendors: catering, decorating, DJs (etc.) must provide insurance. Any equipment brought onto City property must be covered by liability insurance.

DN Rentals may not be reserved past 10 PM Monday through Saturday, 9 PM on Sunday.

DN The Hall rental includes only the use of the Hall and does not come with additional amenities.

DN Use of nails, pins, confetti, glitter and colored/powdery substances is not permitted.

DN You must disclose if any guests attending your event will be requiring private security. This requires a separate permit and approval.

DN N/A Use painter's tape to place items on the wall if decorating.

DN Refunds will not be issued. If the event is canceled, a credit will be issued for a future date.

DN Security Damage and Trash deposit is \$500.00, at this time, we accept personal checks or money orders. The deposit will be returned after verification of the above-agreed items are met, the facility has been verified of no damage to the room, all trash has been cleared and the permittee remained within the designated time permitted.

Print Name: Olivia Jones - Niedzialek for Cypress Lakes HOA, Inc.

Signature: Olivia Jones - Niedzialek

Date: 4/7/2026

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

The Responsible Party assumes all responsibility for any and all risks of damage or injury that may occur while using the Facility and surrounding park area. In consideration for being able to use the Facility, the Responsible Party hereby waives, releases, and discharges from any and all liability the City, its elected and appointed officials, employees, agents, and volunteers for death, disability, personal injury, property damage, property theft or actions of any kind which may occur. Responsible Party agrees to release, waive, indemnify and hold harmless the City, its elected and appointed officials, employees, agents, and volunteers, from any and all liability or claims made by other individuals or entities as a result of using the Facility.

Responsible Party's Name: Cypress Lakes Homeowners Assoc. Inc.

Responsible Party's Signature: Olivia Jones - Niedzialek

Date: 4/7/2026

Special Questions:

Alcohol is not permitted unless Coral Springs Police Officer is hired for event detail. Detail permit is an additional cost ranging from \$60 to \$100 per hour. Detail Permits can be acquired by contacting Abanton@coralsprings.gov. In addition to police detail, renter must provide liability insurance for event.:

Any onsite vendors or vendors bringing any type of equipment onto City property (Caterer, DJ, Bounce house, chair rentals etc) must be listed on permit and provide the City with a certificate of liability insurance.:

Vendor is responsible for completing a 'Vendor Application'. All equipment must be listed on application and confirmed by Parks & Recreation staff. Please Initial: .

501C Non-profit group: Must provide certificate to Parks Dept.: .

Confetti, glitter, and/or powdery substances are not permitted in the meeting rooms or halls.: .

Using pins or nails to hang wall decorations is not permitted. Please use painters tape.: .

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Household:21968

Processed on 04/07/26 @ 11:51am by ATorres	Total New Fees	63.33
	Discount Applied	0.00
	Total New Taxes	0.00
	Total Due	63.33
	Total Fees Paid	63.33
	Total Taxes Paid	0.00
	Total Paid	63.33

Household Balance Information

Overall Household Credit Balance Available	3.96
Overall Household Balance Due	0.00

Payment of: 63.33 Made By: Credit Balance With Reference:

DATE: 4/7/2026

MEETING ROOM REQUEST

It is the responsibility of the person who signs the application for conference meeting room use to serve as the authorized representative of the group and to remain on the premises throughout the period for which it is reserved, ensuring the safety and security of attendees and the Parks and Recreation Department facility, as well as ensuring that attendees observe the regulations set forth herein.

BUSINESS, GROUP OR ORGANIZATION INFORMATION	
RESPONSIBLE PARTY NAME:	Cypress Lakes Homeowners' Assoc. Inc.
ADDRESS:	4800 Corporate Blvd. NW
CITY, STATE, ZIP:	Boca Raton, FL 33431
PHONE:	(561) 392-1600 - Jeff Olson, LCAM
EMAIL:	jeff.olson@hawkkeye-fla.com
FACILITY PERMITTED:	Veterans Hall
DATES RESERVED:	4/14/26 and on

CERTIFICATE REQUIREMENTS

Comprehensive General Liability with the following minimum limits of liability:

- o \$1,000,000 Combined Single Limit, Bodily Injury and Property Damage Liability per occurrence
 - o Name the City of Coral Springs as Additional Insured AND Name the City of Coral Springs as a Certificate Holder
 - o In the certificate holder box, list the City of Coral Springs 9500 W Sample Rd. Coral Springs, FL 33065
 - o Comprehensive Automobile Liability Insurance for all owned, non-owned and hired automobiles and other vehicles used by the vendor in the performance of the work with the following minimum limits of liability:
 - o \$1,000,000 Combined Single Limit, Bodily Injury and Property Damage Liability per occurrence
 - o Worker's Compensation Insurance minimum of Two Hundred Thousand and xx/100 dollars (\$200,000.00) per accident for statutory obligations imposed by Worker's Compensation or Occupational Disease Laws, including, where applicable, the United States Longshoremen's and Harbor Worker's Act, the Federal Employer's Liability Act and the Homes Act.
- A) The Parks and Recreation Department requires adult sponsorship for any meetings involving persons of high school age or younger. The applicant and the adult sponsor must expressly agree on the application form that the adult sponsor will attend and supervise the meeting, and that the applicant and the adult sponsor will accept responsibility for, and will reimburse the Parks and Recreation Department for, any damage caused by the group or by members of the group to the meeting room or to the Parks and Recreation Department.
- B) The applicant shall leave the meeting room in the same condition as it was at the beginning of the meeting.
- C) Authorization for Parks and Recreation Department facilities and meeting room use does not include the use of staff time other than to provide access to the facility or meeting room.
- D) Decor must not mar or affect the appearance of the structure and must be removed immediately following the event. No tape, adhesive, nails, screws, metal hooks, etc. may be placed on or driven into any wall or surface of the facility.
- E) Any individual and/or organization distributing materials, showing movies, or performing plays, etc. is required to warrant that it will secure all necessary performance/copyright licenses and indemnify the City of Coral Springs Parks and Recreation Department for any failure on their part to do so.

**THIS FORM IS TO BE COMPLETED IN BLUE OR BLACK INK.
MUST BE RENEWED EVERY 3 MONTHS.**

- INITIAL ON Alcohol is permitted if patron meets the following: -Must hire a Coral Springs Police Officer Detail; Amy Backer CSPD 954-346-1312 & attach the receipt to permit. Liability insurance is required.
- INITIAL ON Any vendors: catering, decorating, DJs (etc.) must provide their insurance. Any equipment brought onto City property must be covered by liability insurance and listed at time of reservation.
- INITIAL ON Rentals may not be reserved past 10 PM Monday through Saturday, 9 PM on Sunday.
- INITIAL ON Use of nails, pins, confetti, glitter, and colored/powdery substances is not permitted.
- INITIAL ON You must disclose if any guests attending your event will be requiring private security. This requires a separate permit and approval.
- INITIAL ON You must disclose if meeting is advertised to the public.
- INITIAL ON Refunds will not be issued. If the event is canceled, credit will be issued for a future date.
- INITIAL ON Security Damage and Trash deposit is \$500.00, personal checks or money orders are accepted. The deposit will be returned after verification of the above-agreed items are met, the facility has been verified of no damage to the room, all trash has been cleared and the permittee remained within the designated time permitted.

Print Name:

Cypress Lakes Homeowners Assoc., Inc.

Signature:

Debi Jones - Nidzialuk

Date:

4/17/2024

Please add:
Jeff Olson - LCPM

Linda Pugliese, Secretary

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

THE RESPONSIBLE PARTY ASSUMES ALL RESPONSIBILITY FOR ANY AND ALL RISKS OF DAMAGE OR INJURY THAT MAY OCCUR WHILE USING THE FACILITY AND SURROUNDING PARK AREA. IN CONSIDERATION FOR BEING ABLE TO USE THE FACILITY, THE RESPONSIBLE PARTY HEREBY WAIVES, RELEASES, AND DISCHARGES FROM ANY AND ALL LIABILITY THE CITY, IT'S ELECTED AND APPOINTED OFFICIALS, EMPLOYEES, AGENTS, AND VOLUNTEERS FOR DEATH, DISABILITY, PERSONAL INJURY, PROPERTY DAMAGE, PROPERTY THEFT OR ACTIONS OF ANY KIND WHICH MAY OCCUR. RESPONSIBLE PARTY AGREES TO RELEASE, WAIVE, INDEMNIFY AND HOLD HARMLESS THE CITY, ITS ELECTED AND APPOINTED OFFICIALS, EMPLOYEES, AGENTS, AND VOLUNTEERS, FROM ANY AND ALL LIABILITY OR CLAIMS MADE BY OTHER INDIVIDUALS OR ENTITIES AS A RESULT OF USING THE FACILITY.

Responsible Party's Name:

Cypress Lakes Homeowners Assoc., Inc.

Responsible Party's Signature:

Debi Jones Nidzialuk

Date:

4/17/2024

FOR OFFICE USE ONLY	
IDENTIFICATION VERIFIED	
WITNESS NAME:	<u>Alanna Torres</u>
WITNESS SIGNATURE:	<u>AS</u>
DATE:	<u>4/17/24</u>