ORDINANCE NO.: 2025-51 FIRST READING September 8, 2025
SECOND READING WAIVED

INTRODUCED BY: CHRIS BERGER THIRD READING WAIVED

ORDINANCE APPROVING THE FACILITY RENTAL APPLICATION FOR PERMIT – NON-AUDITORIUM FOR THE USE OF GURNEY SCHOOL PARKING LOT FOR THE 2025 FALL FESTIVAL TO BE SUBMITTED TO CHAGRIN FALLS BOARD OF EDUCATION, AUTHORIZING THE MAYOR TO EXECUTE THE APPLICATION, AND DECLARING AN EMERGENCY.

WHEREAS, Council desires to rent the Gurney School parking lot for the purposes of parking for the 2025 Village of South Russell Fall Festival;

WHEREAS, the Chagrin Falls Board of Education requires a facility rental application for permit be submitted for such requested use of Gurney School's premises (the "Application"), a copy of which is attached hereto and incorporated herein by reference as <u>Attachment 1</u>; and

WHEREAS, Council desires to submit such Application and agree to the terms and conditions of the Application.

NOW, THEREFORE, BE IT ORDAINED by the Council of the Village of South Russell, Geauga County, Ohio that:

SECTION 1. The Application, and its terms and conditions attached hereto as **Attachment 1**, for the use of Gurney School's parking lot for the 2025 Fall Festival is hereby approved.

SECTION 2. The Mayor is hereby authorized to execute the Application and submit it on behalf of the Village.

SECTION 3. It is hereby found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and of any of its committees on or after December 2, 1975, that resulted in formal actions, were in meetings open to the public in compliance with all legal requirements, including Section 121.22, Ohio Revised Code.

SECTION 4. That this Ordinance is declared to be an emergency measure necessary for the immediate preservation of the public peace, property, health and safety of the inhabitants of the Village and to allow for such parking at the upcoming event; wherefore, provided it receives the affirmative vote of at least two-thirds (2/3) of all members elected to Council, this Ordinance shall be in full force and effect from and immediately upon its passage by this Council and approval by the Mayor.

Mayor - President of Council

ATTEST:

Fiscal Officer

aniele Romanowski

I certify that	Ordinance No.	2025-51	was dub	v enacted	on the	BTH	day	of
SEPTEMBER								
accordance with the					·	•		

Danute Romanowski Fiscal Officer

Form 7510 F2



CHAGRIN FALLS EXEMPTED VILLAGE SCHOOL FACILITY RENTAL APPLICATION FOR PERMIT - NON-AUDITORIUM

Name of Organizatio	n:Village of Sou	uth Russell			
Address: 5205 Chil	licothe Rd., South	D 0.011.11000			
Applicant Name: Ma		ns Phone:	140-557-5533		
Applicant Email: ma	yor@southrussell	.com			
Event Supervisor/Des	signee Name:	yor William Koons	ell Phone: 44	0-227-1346	
Facility Requested:		also being submitted, check h			
Date	Start Time	End Time			
10/5/2025	1:00 p.m.	5:00 p.m.			
Purpose of Use: Sou	king for the annua th Russell Village	l South Russell Village Fall F Park.	estival. South	Russell will provide trans	sportation to and from th
Will alcohol be serve Will concessions be s	aterials, display si d? No If y erved? No	gns, or highlight products or res, please see Board Policy 7 If yes, please see Concession	510 and Admi Guidelines	inistrative Guideline 7510.	A
Will other special equ	in be needed? <u>N</u>	o If yes, please specif	pecify:		
Will admission be ch	arged?				
Proceeds go to charit	y: NA I	f yes, name: or,	for-profit enti	ity: If yes, n	ame:
Proof of lia serve alcoh Applicant h Proof of va or served in	bility insurance, in ol. nas reviewed Boar lid permit for sale n the District's (1.)	s are in accordance with Bo neluding additional coverage d Policy7510 and Administra of alcohol issued by the Ohio Performing Arts Center Lobb approved/determined by the S	is required by tive Guideline Division of I by, (2.) Chagri	Board Policy if applicant 7510A. Liquor Control is required in Falls Intermediate Scho	if alcohol is to be sold
NORMAL RATE SO (All for-profit organiz		urged double the normal rate.)			
CHARGES			Hours	Normal Rate/Hour	Total
General Classroom				\$15	

Innovation Center (Research/Collaboration Spaces Only) High School Library	\$20	
Sands Community Room	\$25	
Gurney Multipurpose Room Intermediate School Cafeteria Middle School Cafeteria High School Commons	\$25	
Gurney Gym Intermediate School Gym	\$40	
Middle School Gym (does not include locker rooms) High School Gym (does not include locker rooms)	\$50	
Middle School Locker Rooms High School Locker Rooms	\$25	
Harris Stadium - Field/Practices (minimum 2-hr block)	\$125	
Harris Stadium Lights *Custodians required for usage/per clean up needed/ attendance	\$50	
Custodial Overtime	\$41.50	
Food Service Equipment	\$20	
TOTAL		

^{*}Some unique spaces not listed on the schedule may be requested for rental. If those non-listed specific spaces are acceptable for rental the Director of Operations and Strategic Initiatives will select rates consistent with similar space types listed on the schedule.

A nonrefundable deposit of 25% of the estimated cost is required in order to reserve a date. The remaining 75% must be paid at least 24 hours prior to the event. Failure to submit payment in advance of the date of rental will forfeit the use of the facilities on the date(s) assigned. Full payment for costs incurred beyond original estimates must be made within 30 days after the event.

Checks Payable to: Chagrin Falls Board of Education

grounds, and regardless of which cla	im, demand, damage, loss, cost of expense is	caused in whole or in part by the negligence of
the renter, or by third parties, or by t	he agents, servants, employees or factors of ar	ny of them.
property. School trash receptacles s	the renter agrees to remove all alcohol contained all not be used for alcohol or alcohol contained the state of the state	ers.
	the renter agrees that when alcohol is sold, se officer to be present to maintain order at the ev	rved, and/or consumed, the District requires th
Signature of Applicant:	bou J. Koms	Date: 9-9-3-5 Date:
Director of Operations and Strate	gic Initiatives:	Date:
Superintendent:		Date:
NOTE:	Vashington St., Chagrin Falls, OH 44022 prior esponsibility of the renting organization.	to rental.
Office Use Only		
Certificate of Insurance Received:		
25% Deposit Received by:	Date:	
Final Balance Received by:	Date:	
	ssion charged and/or materials distributed	Date:
Application Received by:		Date:
	of Chagrin Falls Ex. Village Schools Employe	e



Certificate No.: 1
Member Number: 5024

CERTIFICATE OF COVERAGE

This Certificate is issued as a matter of information only and confers no rights upon the Certificate holder. This Certificate does not amend, extend or alter the coverage afforded by the coverage document(s) listed below.

NAME & ADDRESS OF MEMBER:

Village of South Russell
5205 Chillipothe Pond

5205 Chillicothe Road South Russell, OH 44022

This is to certify that the coverage document(s) listed below have been issued to the Member named above and are in force at this time. Notwithstanding any requirement, term or condition of any agreement or other document with respect to which this Certificate may be issued or may pertain, the coverage(s) afforded is subject to all the terms, exclusions and conditions of the Coverage Agreement(s).

TYPE OF COVERAGE	EFFECTIVE DATE	EXPIRATION DATE	LIMIT OF COVERAGE
General Liability	2/24/2025	2/24/2026	\$2,000,000
Auto Liability	2/24/2025	2/24/2026	\$2,000,000
Public Officials Liability	2/24/2025	2/24/2026	\$2,000,000
Law Enforcement Liability	2/24/2025	2/24/2026	\$2,000,000
Excess Liability	2/24/2025	2/24/2026	\$3,000,000

CANCELLATION: Should the above described coverage document(s) be cancelled, the Public Entities Pool of Ohio will endeavor to mail 30 days written notice to the below named Certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the pool.

SPECIAL CONDITIONS/OTHER COVERAGES:

Proof of coverage for Fall Festival on 10/05/25 at 400 E Washington Street, Chagrin Falls, OH 44022.

NAME & ADDRESS OF CERTIFICATE HOLDER:

Chagrin Falls Board of Education 400 E Washington Street Chagrin Falls, OH 44022 DATE ISSUED: 9/2/2025

Authorized Representative