



TOWN OF FREEPORT, MAINE
Municipal Offices
30 Main Street
Freeport, ME 04032
(207) 865-4743 Fax (207) 865-0929

Bow Street Park Usage Agreement

This agreement is between the Town of Freeport and the Hilton Garden located at 5 Park Street, Freeport, Maine for use of Memorial Park located at the corner of Bow and Park Streets for events catered by the Hilton Garden Inn Freeport. Sponsored events not deemed as Weddings must receive prior approval of the Town Council.

TERM OF AGREEMENT

The agreement is valid from January 1, 2024 through December 31, 2024. This agreement may be terminated by either party with thirty (30) days written notice.

RESERVATIONS

Reservations will be made by a representative of the Hilton Garden Inn only, not by clients making arrangements with the hotel. The reservations should be directed via e-mail to Christine Wolfe, Town Clerk, at cwolfe@freeportmaine.com. Ms. Wolfe will confirm the reservation by return e-mail. Reservations will be accepted on a first-come, first-served basis and will not be limited to use by the Hotel exclusively. Each event will consist of a four hour block of time.

RESERVATION FEE

The non-refundable fee for use of the park will be \$200.00 per day or event should there be more than one event in a single day. The fee will be due three (3) business days in advance of the event. Please make checks payable to the Town of Freeport.

TOWN PROVIDED SERVICES

The Town will ensure that the lawn is mowed, grounds maintained and free of debris 2 to 5 days prior to the event, weather permitting.

SERVICES PROVIDED BY THE HILTON GARDEN INN

The Hotel will be responsible for all event set-up, tear-down and clean-up after the event. The Town requests that no throwing of rice, birdseed, confetti, or the like, be allowed at the Park. At this time no alcoholic beverages may be served or consumed in the Park.

ADDITIONAL CONDITIONS

No damage should be done to the Park and the grounds should be returned to the condition found prior to the event.

INSURANCE

The Hotel shall maintain in full force and effect at all times a policy of comprehensive public liability insurance with limits of not less than \$2,000,000, naming the Town of Freeport as additional insured. A certificate of insurance must be provided to the Town of Freeport.

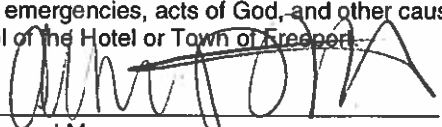
HOLD HARMLESS

The Hilton Garden Inn shall and hereby does indemnify and hold the Town of Freeport harmless from and against any and all claims, damages, demands, actions and causes of action for injury to persons or damage to property in or about the Park premises arising in any way from the Hotel's occupancy or use of the Park during the term of this agreement.

FORCE MAJEUR

Both the Hotel and Town of Freeport shall not be liable for non-performance of this contract when such non-performance is attributable to strikes, accidents, government (State, Federal and Municipal) regulations of, or restriction upon, travel or transportation, non-availability of food, beverage, or supplies, riots, national emergencies, acts of God, and other causes whether enumerated herein or not, which are beyond the reasonable control of the Hotel or Town of Freeport.

 Sophia Wilson, Freeport Town Manager



 General Manager
 Hilton Garden Inn Freeport



AAMWOBU-01

ACHARLES

CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
11/6/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER License # 1780862 HUB International New England 275 US Route 1 Cumberland Foreside, ME 04110	CONTACT NAME: Adrienne Charles		
	PHONE (A/C, No, Ext):	FAX (A/C, No):	
E-MAIL ADDRESS: adrienne.charles@hubinternational.com			
INSURED AAM 15 Management LLC 78 Blanchard Rd Suite 100 Burlington, MA 01803	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : The Travelers Indemnity Company		25658
	INSURER B : Charter Oak Fire Insurance Company		25615
	INSURER C : Travelers Property Casualty Company of America		25674
	INSURER D : Federal Insurance Company		20281
	INSURER E : INSURER F :		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	X		6303W284131	11/1/2023	11/1/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BA0X669580	11/1/2023	11/1/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ 20,000 BODILY INJURY (Per accident) \$ 40,000 PROPERTY DAMAGE (Per accident) \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			EX0X677186	11/1/2023	11/1/2024	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
D	Excess Liability			7818-7203	11/1/2023	11/1/2024	Excess Liability \$ 15,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Bow Street Park usage Town of Freeport is included as an additional insured on the general liability policy, per policy provisions, as required by written contract executed prior to a loss or claim.

CERTIFICATE HOLDER**CANCELLATION**

Town of Freeport 30 Main St Freeport, ME 04032	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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