



**COLDWELL BANKER COMMERCIAL
PACIFIC PROPERTIES**

4485 Pahee Street Suite 135
Lihue, Hawaii 96766

BROKERAGE (808) 245-4649
PROPERTY MANAGEMENT (808) 245-7238
FACSIMILE (808) 245-7883
WEBSITE www.cbcpacific.com

**APPLICATION FOR PERMISSION TO USE
ELEELE SHOPPING CENTER**

The Eleele Shopping Center is privately owned and has been developed to provide the general public with a modern, clean, comfortable and safe place in which to shop. Eleele Shopping Center recognizes that from time to time various groups may desire to use appropriate areas for activities that they deem to be of community interest. To accommodate such groups in a manner and to the extent consistent with the primary commercial purpose of the Center, the Center will designate a specific area or areas which are available on a "first come first served" basis.

NAME OF ORGANIZATION: _____

TYPE OF ACTIVITY: _____

DATE(S) REQUESTED: _____ **FROM:** _____ **AM/PM TO:** _____ **AM/PM**

MAXIMUM NUMBER OF PERSONS ENGAGING IN ACTIVITY: _____

GROUP LEADER OR PERSONS RESPONSIBLE: (please print clearly)

NAME: _____

EMAIL: _____

MAILING ADDRESS: _____

PHONE: _____ **FAX:** _____

LIABILITY WAIVER: The undersigned hereby requests permission to use Eleele Shopping Center on behalf of the organization and persons signing this application will be responsible for maintaining the cleanliness of the area used; will not restrict the flow of traffic (pedestrian or vehicular) on said property; and will indemnify and hold harmless Eleele Associates, Inc, tenants and Coldwell Banker Commercial Pacific Properties, from any and all claims for death, personal injury and property damages, including reasonable attorney's fees and court costs arising from the use by the undersigned of the property of the shopping center. It is further agreed that permission to be on said property may be withdrawn by the owners or their duly appointed agent at any time without prior notice.

SIGNATURE: _____

DATE: _____

APPROVED BY: _____

Coldwell Banker Commercial Pacific Properties, agent for Eleele Associates, Inc.

DATE: _____

KEEP THIS FORM WITH YOU DURING THE EVENT