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APPLICATION FOR USE OF SCHOOL FACILITIES

Name of Organization EAST STROUDSBURG NORTH LITTLE LEAGUE (ESNLL) Today's Date 2-27-10 BY: 2-27-10

Non-Profit?  yes  no Will an admission fee be charged?  yes  no Are you requesting a waiver of facilities fees?  yes  no  
If yes, amount \$ \_\_\_\_\_ If yes, attach a letter of justification addressed to the Board of Education. This does not include a waiver of fees for scheduled district personnel.

Specific purpose of use: BASEBALL / SOFTBALL FIELD  
Name of School Requested E.S. NORTH SOFTBALL FIELD H.S. / LEHMAN INTERMEDIATE J.V. SOFTBALL FIELD / BASEBALL F.

DAY(S)	DESCRIPTION
from — DATE(S) — to	from — HOURS — to (meeting, practice, game, rehearsal, performance...)
<u>March 15, 2010</u> <u>Nov 15, 2010</u>	<u>EVENINGS WEEKENDS</u>
<u>March 16, 2010</u>	<u>PRACTICES + GAMES</u>

Facility Required:  Auditorium  Cafeteria  Gymnasium  
 All-Purpose Room  Stadium  Kitchen/Preparation  Kitchen/Serving  
 Swimming Pool (requires proof of certified lifeguard)  Stage  Fields (specify) \_\_\_\_\_  
 Classrooms # \_\_\_\_\_  Other (specify) \_\_\_\_\_

Equipment Required: (\*must be operated/attended by school personnel)  
 Kitchen Equipment\*  Sound System  Record Player/Stereo Equip.  Piano  
 Stage Lighting\*  Motion Picture Projector  Overhead Projector/Screen  Folding Stands  
 Scoreboard\*  Athletic Equipment  Other (specify) \_\_\_\_\_

The District has the right to assign additional security and other personnel as needed. Your organization will be subject to fees for these services. Your organization must provide a Certificate of Insurance listing the ESASD as co-insured as follows:

\$ \_\_\_\_\_ Bodily Injury Liability (\$500,000 minimum) \$ \_\_\_\_\_ Property Damage Liability (each occurrence) (\$500,000 minimum)

List at least one, but preferably two, responsible officials of your organization who will be present at the time facilities requested are being used, and who will accept full responsibility for adherence to School District regulations by all persons in attendance.

Name KEN MILLER Address 1355 Pine Ridge, Bushkill PA Phone 570-588-3800  
Name TOM MARCHESANI Address 159 WINDOM LAKES E. STROUDSBURG PA Phone 570-223-2969

I certify that I have read, understand, and agree to adhere to Policy #707 of the East Stroudsburg Area School District concerning Use of School Facilities. Further, my organization forever releases the East Stroudsburg Area School District, the East Stroudsburg School Authority, their directors, agents, employees and servants from all claims, actions, and charges whatsoever arising out of the event(s) conducted on the above-mentioned date(s) for which this application is submitted. My organization will defend all actions, suits, complaints, or legal proceedings of any kind brought against the Board of Education and any of its agents, servants or employees and further will hold harmless and indemnify the said School Directors, School District, and School Authority from any expenses and judgments or decrees recovered against them as a result of said use of these facilities.

Signature — Responsible Organization Official Kenneth J. Miller ESTILL - President (CD) Phone (day) 570-588-3800 (eve.) 610-390-6629  
*OK as long as no interference H.S.*

Billing Address \_\_\_\_\_

APPROVALS: Principal [Signature] Date 3/14/10  
Business Administrator [Signature] Date 3/15/10  
copy to:  stage manager  athletic director  cafeteria manager  head custodian  librarian  a/v coordinator  other Date 1/1

For office use only: FACILITIES USE INVOICE

Facilities/Equipment used:	Charges: \$
_____	\$
_____	\$
Personnel Employed: <u>2</u>	Charges: \$
(attach time sheets)	\$
_____	\$
Other (specify):	Charges: \$
_____	\$

**From:** "Hollenbach, Jonathan" <johollenba@state.pa.us>  
**Subject:** 2009-2010 Payment in Lieu of Taxes (PDE-2098)  
**Date:** Fri, 12 Mar 2010 16:09:59 -0500  
**To:** "sharon-laverdure@esasd.net" <sharon-laverdure@esasd.net>, "patricia-bader@esasd.net" <patricia-bader@esasd.net>



### **East Stroudsburg Area**

Mrs. Laverdure,

Enclosed is form PDE-2098, which is used to apply for appropriations payable in lieu of taxes under the provisions of Section 604 of the Public School Code of 1949, as amended.

The East Stroudsburg Area School District is eligible to apply for the school year ending June 30, 2010, on behalf of the component former school district of Lehman Township for which Section 604 payments were approved prior to reorganization.

Please verify the accuracy of the information on the attached form, make any necessary revisions and return it by April 2, 2010, to the address at the bottom of the form.

Thank you.

**Jonathan Hollenbach** | Accountant

Division of Subsidy Data and Administration



Bureau of Budget and Fiscal Management

Pennsylvania Department of Education

333 Market Street | Harrisburg PA 17126-0333

Phone: 717.787.5423 | Fax: 717.772.4106

johollenba@state.pa.us|www.education.state.pa.us

  
 **Attachment:** ESASD\_PDE-2098\_Mar10.pdf (50Kbytes)

**APPLICATION FOR PAYMENT**  
PROPERTY ACQUIRED BY STATE  
FOR WATER CONSERVATION OR FLOOD PREVENTION  
(Section 604 of School Code)

SCHOOL DISTRICT	AUN	SCHOOL YEAR
East Stroudsburg Area	120452003	2009-2010

This application is for Payment in Lieu of Taxes on property in Pike County,  
acquired by the state for the purpose of water conservation or flood prevention in the  
National Recreation Area project.

School district (or component former district) from which property was acquired:  
Lehman Township

Assessed valuation of property at time of acquisition: \$ 94,371.00

Tax rate for school purposes during school year for which application is made: 118.94 mills

Amount due school district (assessed valuation x mills): \$ 11,224.49

**SIGNATURES**

District Superintendent: \_\_\_\_\_

President of School Board: \_\_\_\_\_

Secretary of School Board: \_\_\_\_\_

Return to: Department of Education  
Bureau of Budget and Fiscal Management  
Division of Subsidy Data and Administration  
Market Street, 4<sup>TH</sup> Floor  
Harrisburg, PA 17126-0333

