



**Molokai Ohana Health Care Inc.
dba Molokai Community Health Center**

CERTIFIED KITCHEN USE AGREEMENT

Molokai Ohana Health Care Kitchen Permit No. MO 000032

OFFICE USE ONLY

App Rcvd: _____
Dep Rcvd: _____
Rent Rcvd: _____
Eff. 10.1.2025

Renter Name: _____ Phone: _____

Mailing Address: _____ Alt. Phone: _____

City: _____ State: _____ Zip: _____ E-Mail: _____

Date(s) of Use: _____

Time(s) of Use: _____

Requesting Special Use Time*: _____

Description of Use: _____

This agreement sets forth the terms and conditions of an agreement for facility rental between Renter and Molokai Ohana Health Care, Inc. (MOHC) dba Molokai Community Health Center (MCHC), which are effective for the term commencing on the date signed and will expire once both parties have fulfilled the contract requirements.

Operations:

Operations conducted in the kitchen shall include food preparation (preparation, cutting, cooling, reheating, cooking, etc.) and cleaning/sanitizing of equipment and utensils. No overnight cold and/or dry storage is available. MOHC Kitchen does not provide nor has access to cooking utensils or items for commercial businesses and noncommercial use.

Support Kitchen Use:

All permitted support kitchen users MUST sign in on the designated Hawaii State Department of Health Support Kitchen Usage Log located on the Bulletin Board.

Fees: (Subject to change)

- \$50.00/hour
- \$250 deposit required for Renter's that will list MOHC Kitchen as their Support Kitchen on their food establishment permit application.
- Available during MCHC business hours only (Mon - Fri 6:00am to 5:00pm).*
- Does not include use of Great Room, Outdoor Patio or Conference Room.

Fees Policy:

The rental fee as well as the deposit (if applicable), will be accepted in the form of cash or check made payable to Molokai Community Health Center. Payment must accompany this application within five (5) business days of reservation. Application and payment not received within five (5) business days of reservations will result in forfeiture of the reservation.

Initial: _____

1. The applicant must make checks for the exact amount due with the Renter's name and address imprinted on the check.
2. No second- or third-party checks will be accepted.
3. A \$25.00 returned check fee will be charged for any check not honored by the bank for any reason.
4. Failure to make payment on a returned check will result in the cancellation of the reservation and future reservations will be denied.
5. Non-profit discounts does not apply to Kitchen Use.

Cancellation Policy:

Notice of cancellation shall be given in person no later than three (3) business days prior to the beginning of the rental term, to receive a full refund.

Security Deposit Policy:

All deposits are fully refundable within ten (10) business days of the end of the rental term, providing all the rules and regulations are met.

Rules and Regulations:

1. Kitchen: All floors must be swept and mopped. Range, stockpot range, oven, refrigerator, sinks and counter tops must be wiped clean with sanitizer and or degreaser. All leftover food, trash, cooking oil, etc. must be removed from the premises. Use of deep fryers is absolutely prohibited within the Support Kitchen. MCHC makes available chlorine test strips; however, MCHC does not provide chlorine.
2. Property & Equipment: Renter shall take good care of the premises and maintain all the personal property, equipment, and furnishings in good condition during the rental term, and at expiration deliver the same good order; normal wear and tear exempted.
3. Grounds: Surrounding grounds and parking area must be cleaned and all food or trash removed. Do not park or operate any motorized vehicle in any area of the facility other than the designated driveway and parking lot.
4. Smoking, Drug, Alcohol Use: MCHC does not allow smoking, drug, or alcohol usage on the property at any time, with the exception of alcohol use in accordance with set policy and explicit authorization from the CEO. A valid County Liquor License must be presented at time of application. Renter must be a 501(c)3 organization; is renting for fundraising purposes only; and is limited to the Great Room and Banyan Tree area. Unauthorized use will result in immediate forfeiture of security deposit and termination of the event.

RULES, REGULATIONS AND RESPONSIBILITIES DISCLOSURE

By signing this document, Renter shall comply with all applicable state and local laws, ordinances and/or regulations. The Renter hereby acknowledges that he/she has read and understands this Kitchen Use Agreement and its rules, regulations, and responsibilities pertaining to the application made with MCHC, and acknowledges and accepts the fees, rules, regulations, and policies as given in this document and its accompanying form(s). The Renter will be held responsible for any other fees incurred by MCHC due to lack of cleaning, damage to the facility, or missing property.

DISCLAIMER LIABILITY

The Renter also agrees to defend, indemnify and hold harmless MCHC, its officers, board of directors, employees and agents against any and all liability, loss, expense, including reasonable attorney's fee, or claims for injury or damages arising out of or connected with this Kitchen Use Agreement.

Renter Signature: _____ Date: _____

MCHC Authorized Signature: _____ Date: _____