## LV Gramercy Owner LP c/o The Koll Company 6029 S. Fort Apache Road #100 - Las Vegas, NV 89148 Phone (702) 982-1700

Email: rsuo@skrres.com or sdugan@skrres.com

	<u>EVENT F</u>	REQUEST FORM	
Tenant Name:			
Address:			
Contact Person:			_Fax #:
Date of Event:	Event Time	:	
Type of Event:			
Event Details:			
Who will be doing all the set up and clean	up?		
Will this event take place in any Common Areas? Yes	No	If the answer is yes, please att highlighting the area to be use	
If the event is being held outdoors what ba	ackup plan do you	have in affect in the event of bac	d weather? Please be specific.
# of People Expected to Attend:			
What type of promotion or advertising is b	eing done for this (	event:	
1) Will you be serving food? Yes	No	Type of food being served:	
Where will you be serving the food?			
Caterer's Name:	Phone #	:	Contact Person:
2) Will you be serving alcohol? Yes	No	Type of alcohol being served:	
Where will you be serving the alcohol?			
Caterer's Name:	Phone #	:	Contact Person:
3) Will you be providing	<b>□</b> <sub>N</sub> .	To the desired and the	
entertainment? Yes Where will you be setting up the entertain	No ment?	Type of entertainment:	
Entertainers	Hone:		
Name:	Phone #	: :	Contact Person:
Will you a need water hook-up? Yes	No	Please describe your specific water needs:	
Will you need an electrical		Please describe your	
hook-up?	No	specific electrical needs:	
Will you be providing			
Porter / Janitorial Services?	No		
Janitorial Co:	Phone #:		Contact Person:
Will you be providing security? Yes	No		
Security Co:	Phone #:		Contact Person:
· ·		on serving food or alcohol yo	-
secure any necessar Should the Landlord approve your ever	-	through the Clark County Heal proval will be contingent upon	<del>-</del>

permits. Event approval may be revoked if the permits are not secured within 48 hours of the event.