

# ARKANSAS REGISTER

## Transmittal Sheet

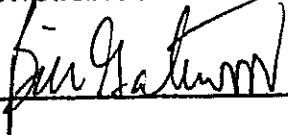


Sharon Priest  
Secretary of State  
State Capitol Rm. 01  
Little Rock, Arkansas 72201-1094

Office Only:	Effective Date <u>8/13/99</u>	Code Number <u>012.01.99--001</u>
Name of Agency	<u>Arkansas Commemorative Commission</u>	
Department	<u>Old State House Museum</u>	
Contact Person	<u>Duncan Jones</u>	Phone <u>501-324-9685</u>
Statutory Authority for Promulgating Rules	<u>Act 256 of the 1947 legislation</u> <u>section 4.2, article 4.2-02 of the Arkansas Commemorative Commission</u>	
		Date
<input type="checkbox"/> Indefinite Effective Date	Legal Notice Published . . . . .	<u>2-14 to 2-20-1999</u>
<input type="checkbox"/> Emergency	Final Date for Public Comment . . . . .	<u>3-19-99</u>
<input type="checkbox"/> 10 Days After Filing	Filed With Legislative Council . . . . .	<u>2-15-99</u>
<input type="checkbox"/> Other	Reviewed by Legislative Council . . . . .	<u>5-13-99</u>
	Adopted by State Agency . . . . .	<u>11-19-99</u>

### CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted  
In Compliance with Act 434 of 1967 As Amended.

  
Signature

501.324.9685  
Phone Number

ACTING DIRECTOR  
Title

7-28-99  
Date

FILED  
IN REGISTER DIV.  
10 AUG - 9 AM 11:11  
STATE OF ARKANSAS

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CLERK OF THE  
STATE OF ARKANSAS  
BY \_\_\_\_\_

REVISION TO THE RULES AND REGULATIONS  
SECTION 4.2, ARTICLE 4.2-02  
OF THE  
ARKANSAS COMMEMORATIVE COMMISSION

The Old State House is a history museum within a historic site. Our first responsibility is to the building, its collections and programs. Within certain limits the building is available for appropriate uses. Members of the Old State House Museum Associates receive up to a 20% discount on rentals.

1. The user agrees that the Old State House facility and grounds will not be used to sell a product, announce a fund raising activity or hold a fund-raising event unless the Old State House is the direct benefactor of the sale or fund-raiser.
2. A fee will be charged to all who use the facility and/or grounds.
3. No event may exceed 4 hours. Set-up and clean-up are limited to an additional hour each.
4. Alcoholic beverages may be served for two hours only.
5. Food and drink are to be catered by a professional firm approved by the Old State House and will be restricted to areas designated by the Old State House. Caterers are required to do their own set-up and clean-up. No beer kegs are permitted inside the building. All trash must be removed from the building and deposited in the dumpster.
6. Should inclement weather occur during use of the grounds, the party is to cease immediately unless the user has made an additional deposit with the Old State House for use of the facility due to inclement weather. Should inclement weather not occur, the deposit for the facility will be returned.
7. Smoking is prohibited by City Ordinance.
8. Small musical ensembles are permitted including electrical keyboard instruments. Pianos may not be taken upstairs.
9. Birdseed and flower petals may be thrown outside only. No rice may be thrown.
10. No alterations of the galleries, walls or any part of the building or exhibits are permitted in any way.

11. User must provide chairs, tables, cloths, security guards (if needed) and any other supplies necessary for the function.
12. With the exception of the Old State House Museum Associates functions, no seated dinners may be held in either legislative chamber. Exceptions to this rule may be permitted on a case by case basis by the Arkansas Commemorative Commission.
13. All foods and beverages for receptions must be carried up and down the central stairway.
14. Due to the age of the floors, dancing will not be allowed.
15. No candles or ice sculptures will be allowed in the museum. Chafing dishes with sterno may be used.
16. Only free standing tents are allowed on the grounds.
17. At least three (3) weeks written notification of cancellation is required or the full rate will be charged.
18. The user is responsible for and will assume the cost for any damages to the building and its contents or the grounds during his or her function.
19. Failure to return this form one (1) month prior to the event abolishes the responsibility of the Old State House to hold the date.
20. A security fee of \$100.00 per guard is required for every 200 people attending the rental. At least one guard will be required for all rentals, even those having fewer than 200 participants.
21. Early delivery of decorations, floral arrangements, food and/or beverages must be approved by the Special Usages Manager.

I have read the Users Policies and Procedures for the Old State House and agree to abide by and be bound by those conditions and procedures as outlined. I understand that to violate or disregard any of these conditions may result in an additional charge.

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Signature

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Date

## FEE SCHEDULE

The user's fee includes the use of space and educational program. Please indicate on the reservation form whether or not you request the educational program.

	SPACE FEE
Grounds Only	\$800.00
Riverfront Room and/or Central Hall	\$800.00
Supreme Court Room	\$400.00
Portraits	\$ 50.00

Supreme Court 35 x 35

100 - reception  
50 - seated

Riverfront 53 x 25

100 - reception  
60 - seated

1. A security fee of \$100.00 per guard is required for every 200 people attending the rental. At least one guard will be required for all rentals, even those having fewer than 200 participants.

2. A wedding portrait fee will not be charged if the wedding and/or reception is held at the Old State House.

SPECIAL USAGE PLAN

Client Name\_\_\_\_\_

Opening Date\_\_\_\_\_

Phone Number\_\_\_\_\_

Approved Contractors and Laborers to be used and paid by applicant:

Caterer:\_\_\_\_\_ Phone:\_\_\_\_\_

Address:\_\_\_\_\_ Arrival Time:\_\_\_\_\_

Porters, Waiters,  
Bartenders:\_\_\_\_\_

Without placing any responsibility on the Old State House, I hereby advise that I will be using the following Vendors, Contractors, etc. and ask that museum personnel accept deliveries or admit these people at the specified times, and I accept full responsibility.

Rental Services:\_\_\_\_\_ Phone:\_\_\_\_\_

Arrival Date/Time:\_\_\_\_\_

Other Services:\_\_\_\_\_

Arrival Date/Time:\_\_\_\_\_

Security Guard or Security Agency\_\_\_\_\_

I hereby verify that all of the above have been given instructions as to service entrance, delivery and pick-up times, and other applicable procedures.

I understand failure to turn this Plan in one (1) month prior to my function abolishes the Old State House of any responsibility to hold my date.

Signed:\_\_\_\_\_ Date:\_\_\_\_\_  
(Client)

Signed:\_\_\_\_\_ Date:\_\_\_\_\_  
(Caterer)

SPECIAL USERS AGREEMENT RESERVATION CONTRACT

Member's Name\_\_\_\_\_

Address\_\_\_\_\_

Fee \$\_\_\_\_\_ Phone\_\_\_\_\_ Home\_\_\_\_\_ Office\_\_\_\_\_

Type of Function\_\_\_\_\_ Location\_\_\_\_\_

Date of Function\_\_\_\_\_ Times\_\_\_\_\_ to\_\_\_\_\_

Number of Guests\_\_\_\_\_ Caterer\_\_\_\_\_

Special Instructions\_\_\_\_\_

1. I agree to assume all risks and liability for any and all damages to persons or Old State House property arising from activities at the Old State House during the period of time covered by this contract, and to indemnify and hold harmless the Old State House therefrom.
2. I agree to complete and return the Special Usage Plan one (1) month prior to the event. I understand failure to do so abolishes the Old State House to hold the date.
3. I understand that membership in the Old State House Museum Associates will allow up to a 20% discount of the rental fee.
4. I understand that at least three (3) weeks written notification of cancellation is required or the full usage fee will be charged.
5. I agree to comply with and abide by the Special User's Agreement Policies and Procedures, which I have read and understood.
6. I understand that I am responsible for making my caterer aware of these conditions.
7. I understand the user's fee must be paid in full on or before the date of my function.

Signature\_\_\_\_\_

DEPARTMENT Arkansas Heritage  
DIVISION Arkansas Commemorative Commission  
PERSON COMPLETING THIS STATEMENT Duncan Jones  
TELEPHONE NO. 501-324-8664 FAX NO. 501-324-9688

FILED  
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### FINANCIAL IMPACT STATEMENT

To comply with Act 884 of 1995, please complete the following Financial Impact Statement and file with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE Old State House Museum rental procedures & fee update

1. Does this proposed, amended, or repealed rule or regulation have a financial impact? Yes x No \_\_\_\_\_
2. If you believe that the development of a financial impact statement is so speculative as to be cost prohibited, please explain. The fees are being revised to be more competitive with other rental facilities in Little Rock.
3. If the purpose of this rule or regulation is to implement a federal rule or regulation, please give the incremental cost for implementing the regulation.

#### 1995-96 Fiscal Year

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other \_\_\_\_\_  
Total \_\_\_\_\_

#### 1996-97 Fiscal Year

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other \_\_\_\_\_  
Total \_\_\_\_\_

4. What is the total estimated cost by fiscal year to any party subject to the proposed, amended, or repealed rule or regulation?

#### 1995-96 Fiscal Year

#### 1996-97 Fiscal Year

The cost will be borne by any individual or group who voluntarily rents the Old State House Museum.

5. What is the total estimated cost by fiscal year to the agency to implement this regulation?

#### 1995-96 Fiscal Year

#### 1996-97 Fiscal Year

-0-

-0-

July 28, 1995

APA/2