RIGHT OF ENTRY PERMIT AND AGREEMENT

Property Address/Description ________________________________________________
________________________________________________________________________
________________________________________________________________________
Name ___________________________________________________
County: INDIAN RIVER    State: FLORIDA    Zip: _______   Telephone Number (___) ________
HOA?    Yes___  No____     If yes, subdivision name________________________ Number of homes ______

Right of Entry
I certify that I am the owner, or an owner’s authorized agent, of the property described above. I grant, freely and without coercion, the right of access and entry to said property to Indian River County, its agents, contractors, subcontractors, for the purpose of removing and/or clearing any or all disaster generated vegetative debris from the above described property.

Hold Harmless
I understand that this permit is not an obligation upon the government to perform disaster generated vegetative debris removal. I agree to indemnify and hold harmless the United States Government, the Federal Emergency Management Agency (FEMA), the State of Florida, Indian River County, and any of their agencies, agents, contractors, and subcontractors, for damages of any type whatsoever, either to the above-described property or to persons situated thereon. I release, discharge, and waive any action, either legal or equitable, that might arise by reason of any action of the above entities, while removing disaster-generated vegetative debris from the property. I will mark any sewer lines, septic tanks, water lines, and utilities located on the described property.

I/We (have_____, have not_____) (will_____, will not_____) received any compensation for disaster generated vegetative debris removal from any other source including Small Business Administration (SBA), National Resource Conservation Service (NRCS), private insurance, individual and family grant program or any other public assistance program. I will report for this property any insurance settlements to me or my family for disaster generated vegetative debris removal that has been performed at government expense.

For the considerations and purposes set forth herein, I hereby acknowledge this agreement by my dated signature below.

Signed this _____ day of _________________, 2016.

(Owner or Owners – All must sign)

___________________________     _______________________________ 
Print Name of Owner      Print Name of Owner

___________________________   _________________________________
Signature      Signature

STATE OF FLORIDA
COUNTY OF __________________

The foregoing instrument was sworn to and subscribed before me this _____ day of ___________ 2016, by________________________________________________________ who is personally known to me or produced ___________________________ as identification.

My Commission Expires:  

Sign____________________________________
Notary Public
Name and Commission #