

Poudre Fire Authority

RESIDENTIAL SAFETY PROGRAM

DATE: _____ COMPANY: _____

OCCUPANT: _____

ADDRESS: _____

I understand that by requesting a Residential Safety Check, I consent to the entry of the Program's personnel into my home. I further understand that the results of the Residential Safety Check do not guarantee that my home will be completely free from fire or other damage.

WAIVER, RELEASE AND HOLD HARMLESS AGREEMENT

In consideration of Poudre Fire Authority conducting a safety check of my home I, on behalf of myself, and all members of my family, as well as my heirs, executors, administrators or successors, hereby waive any claim or cause of action of any nature that I have, or in the future may have, against any and all individual or organizational participants in the Residential Safety Check Program, including but not limited to the Poudre Fire Authority, the municipality of City of Fort Collins and its officers, agents or employees, which claim or cause of action grows out of or results from a fire or other damage, following the said Residential Safety Check; and I further hereby agree to release and hold harmless any and all organizational and individual participants including the aforesaid fire department and municipality in the Residential Safety Check from and against all damages of any kind, to persons or property, growing out of or resulting from a fire or other incident in my referenced home.

I acknowledge having read, understood, and agreed to the above.

Print name (Responsible party) Signature Date

Witness (print name) Signature Date