



It's Our Nature To Volunteer

# Property Owner Permission & Mutual Indemnity Agreement

*Please Read Carefully Before Signing*

I (the "Owner") hereby expressly grant permission to SOLV, its staff, its volunteers and its project partners to enter my property located at \_\_\_\_\_  
\_\_\_\_\_ on \_\_\_\_\_ (date(s)) between the hours of \_\_\_\_\_ and \_\_\_\_\_ (time). This permission is granted for the sole purpose of allowing performance of certain activities to take place on or near my property. Those activities include but are not limited to \_\_\_\_\_  
\_\_\_\_\_ and any other activities that may be necessary and appropriate to the performance of such activities ("project activities").

I agree that my permission is granted on a completely voluntary basis. I have neither received nor expect to receive any form of compensation in exchange for my permission to perform project activities upon my private property.

I agree to defend, indemnify and hold SOLV harmless from any and all claims, losses, liability, damages, or expenses (including reasonable attorney fees and litigation expenses) arising out of the project activities to the extent such claim or damage is caused by my act, omission, negligence, or misconduct, or of my agents, employees, volunteers, or representatives, except for (but only to the extent of) liability directly caused by SOLV, its agents, employees, volunteers, or representatives.

SOLV agrees to defend, indemnify and hold the Owner harmless from any and all claims, losses, liability, damages, or expenses (including reasonable attorney fees and litigation expenses) arising out of the project activities to the extent such claim or damage is caused by the act, omission, negligence, or misconduct of SOLV, its agents, employees, volunteers, or representatives, except for (but only to the extent of) liability directly caused by the Owner, or Owner's agents, employees, volunteers, or representatives.

Program/Project Description \_\_\_\_\_

Name of Property Owner/Manager \_\_\_\_\_

Property Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

For SOLV: \_\_\_\_\_

Its: \_\_\_\_\_