

**LIONEL JOHNSON, JR.**

MAYOR

CITY COUNCIL

**WILLIAM CUSHENBERRY, JR.**

**MELVIN HASTEN, SR.**

**JEFFERY HAYES, SR.**

**HOZA REDDITT, SR.**

**KELVIN YORK, SR.**

**KEVIN AMBEAU, SR.**

POLICE CHIEF

 ­ **CITY OF ST. GABRIEL**

**HOLD HARMLESS AGREEMENT FOR BUILDING CODES**

PERMIT APPLICATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owner’s Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In consideration for permits issued for the project address identified above, I hereby agree to protect, defend, indemnify, and hold the City of St. Gabriel its agents and authorized personnel their officers, representatives, managers and employees harmless against any and all claims, demands, awards, suits, judgment, liabilities, losses or damages arising out of, or being in any way connected with the design, construction and/or code compliance review for the above referenced project.

The obligation should not be construed to negate, waive or otherwise reduce any other right or obligation of indemnity that may exist in the favor of the City of St. Gabriel. It is further understood and agreed that if the construction of the project is contrary to, or does not meet the standard of the City of St. Gabriel Building Codes, or the permit to be issued pursuant to this Letter, I, as the owner shall, at my own expense, remove or modify any and all components that do not conform.

I also acknowledge that separate permits from City of St. Gabriel Public Service Department may be required for work on the public rights of way that involve paving, sidewalks, excavation, drainage, maintenance of traffic/street closure, tree removal/relocation/planting or dewatering, etc., as needed. For applicable permits, please contact the Public Works Department at (225) 642-9600.

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Owner’s Signature Contractor's Signature

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_, 20\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_, 20\_\_\_\_

STATE OF LOUISIANA STATE OF LOUISIANA

Iberville Parish Iberville Parish

Sworn to and subscribed before me this \_\_\_\_\_\_\_\_ Sworn to and subscribed before me this \_\_\_\_\_\_\_\_\_\_\_\_

Day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_. Day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_.

By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(SEAL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (SEAL) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature / Printed Name of Notary Signature / Printed Name of Notary

□ Personally known, or □ Produced Identification □ Personally known, or □ Produced Identification

Type of Identification produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type of Identification produced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I declare and agree and understand that this original agreement shall be filed with the office of the Building Official of the City of St. Gabriel and a certified copy with a recording date thereon shall be furnished to the Inspection Division before any work may be performed.