

PERMISSION AND CONSENT TO ELIMINATE GRAFFITI

FREE GRAFFITI REMOVAL

Please indicate your acceptance or refusal of the City's offer to remove graffiti for free by placing a check by Acceptance or Refusal, providing the requested information, and returning the form to the address below.

ACCEPTANCE OF CITY'S OFFER FOR FREE GRAFFITI REMOVAL

ACCEPTANCE OF CITY'S OFFER FOR FREE GRAFFITI REMOVAL I, the undersigned, certify that I own or have the authority to consent to graffiti removal for the property located at the address shown below. I hereby give permission and consent to the City of Arlington and the City's employees, officers, contractors, and volunteers to enter my property at their convenience for the purposes of inspecting and eliminating graffiti located on exterior surfaces of the property. I understand that only the graffiti and the area immediately surrounding the graffiti are to be painted or cleaned. I further agree that neither the City nor the City's contractor is required to conceal or remove the graffiti to my satisfaction. I DO HEREBY WAIVE ALL CLAIMS, RELEASE, INDEMNIFY, DEFEND AND HOLD HARMLESS THE CITY OF ARLINGTON AND ALL OF ITS OFFICIALS, OFFICERS, AGENTS, EMPLOYEES, VOLUNTEERS, AND CONTRACTORS IN BOTH THEIR PUBLIC AND PRIVATE CAPACITIES, FROM ANY AND ALL LIABILITY, CLAIMS, WHICH MAY ARISE BY REASON OF INJURY OR DEATH TO PERSONS OR LOSS OF, DAMAGE TO OR LOSS OF USE OF ANY PROPERTY OCCASIONED BY ERROR, OMISSION OR NEGLIGENT ACT OF MYSELF OR ANY OTHER PERSONS WITH REGARD TO THIS AGREEMENT, AND I WILL, AT MY OWN COST AND EXPENSE, DEFEND AND PROTECT THE CITY OF ARLINGTON AGAINST ANY AND ALL SUCH CLAIMS AND DEMANDS. Furthermore. the permission and consent granted herein to enter the above described property and to abate graffiti shall remain in effect for as long as I own the property. I understand that I may cancel this future consent by submitting written notice to the City of Arlington Director of Community Services. REFUSAL OF CITY OFFER FOR FREE GRAFFITI REMOVAL I, the undersigned, certify that I own or have the authority to refuse to the City's offer for free graffiti removal and I refuse the offer for the property address shown below. **REQUESTED INFORMATION:**

Graffiti Address Covered by t	his Form:		
Printed Name of Owner/Author	orized Person:		
Signature of Owner/Authorize	ed Person:		
Signatory's Address:			
Signatory's Phone Number:		(Day)	(Evening
Date of Signature:			

This form can be folded in thirds and mailed to: City of Arlington, Code Compliance Services
ATTN: David Wyatt
PO Box 90231 MS 70-0110
Arlington, TX 76004-3231
Or, Faxed to: (817)459-5381