



**City of Flagstaff**  
**Utilities Department**  
 211 West Aspen Avenue  
 Flagstaff, AZ 86001  
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 jboyer@flagstaffaz.gov

## Hold Harmless Agreement

**Instructions:** Please read the following before signing.

After notarizing, this document must be returned to Utilities Department  
 ATTN: Industrial Waste Division

### **Backflow Prevention Assembly - Located inside of Building on Property Subject to Flooding**

Property Street Address and Legal Description: \_\_\_\_\_

Project Description: \_\_\_\_\_

Owner (s) \_\_\_\_\_

Mortgagee or other interest holder: (if none, write NONE) \_\_\_\_\_

WHEREAS, \_\_\_\_\_  
 hereinafter referred to as "OWNER", owns the property legally described above except as noted;

and WHEREAS, the above described Backflow Prevention Assembly is identified by the City of Flagstaff as subject to leaking and flooding;

and Whereas the city of Flagstaff typically requires that backflow prevention assemblies be located outside of the building,

and WHEREAS, OWNER said property, being fully aware of its flooding potential, has applied for a waiver to City policy from the City of Flagstaff.

NOW, THEREFORE, OWNER, in consideration of the issuance of a building permit from the City of Flagstaff and for owner being allowed to install a backflow prevention assembly inside of the existing building, make the following agreement:

1. That OWNER of said property, for himself and for his heirs, assigns, and successors in interest, hereby waives, renounces, relinquishes, absolves, and discharges the City of Flagstaff from any and all liability for personal injury and property damage which may result from flooding or other water damage which may occur at any time as a result of the installation of Backflow Prevention Assembly inside of the building.

2. That OWNER shall defend, hold harmless, and indemnify the CITY from and against all liability, losses, claims, damages, costs, attorneys' fees, and expenses of whatever kind or nature which the CITY may sustain, suffer or incur, or be required to pay by reason of the issuance of the permit.

Witness \_\_\_\_\_

Witness \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_

Firm Name \_\_\_\_\_

STATE OF ARIZONA

COUNTY OF COCONINO

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared \_\_\_\_\_ to me personally known to be the person (s) described in, or who produced as identification \_\_\_\_\_, and who did take an oath, executed the foregoing instrument and acknowledge before me that \_\_\_\_\_ executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid, this day of \_\_\_\_\_ 20\_\_

Signature of Notary \_\_\_\_\_

Type of Printed Notary Name \_\_\_\_\_

Serial Number of Notary \_\_\_\_\_

SEAL APPROVED: