

PERMIT

TO REMOVE DEAD OR DOWNED TREES ON BETTENDORF
PARK LAND OR OTHER PUBLIC AREAS

Applicant's Name: _____

Applicant's Address: _____

Street City Zip

Applicant's Phone: _____

Home Work Cell

Applicant's Email: _____

1. Please describe the area which you are requesting permission to remove dead or downed trees from: _____

2. What equipment do you intend to use to remove the tree materials? _____

3. What volume of material is to be removed (approx.)? _____

4. What do you plan to use the removed material for? _____

5. How do you plan to remove the material from the park or public area? _____

Waiver

In partial consideration for allowing myself to remove dead or downed tree material from park or public land, I certify and agree as follows:

1. I am covered by health insurance in such amount as will reimburse a health care provider for care as a result of injury removing said material.
2. I/we hereby agree to waive, release, and hold harmless the City of Bettendorf, the Bettendorf Park Board, their agents, employees, and volunteers from any and all liability arising out of your participating in the activity described above, including injury while conducting or observing the activity, including any injury while on the premises immediately before or after the activity.
3. I shall bear full responsibility for any loss or theft of personal items while participating in this activity.
4. I further agree to be responsible and provide compensation for any damage to any park facilities or property that may occur during the removal of any dead or downed tree removal as a result of my actions.

Signature _____ Date _____

THIS IS A RELEASE, PLEASE READ CAREFULLY BEFORE SIGNING!

Approved _____	Denied _____	Signature _____
		Date _____