

DEPARTMENT OF PUBLIC SERVICE

CITY OF COLUMBUS DIVISION OF TRAFFIC MANAGEMENT

INDEMNITY RELEASE FORM

CITY OF COLUMBUS

STATE OF OHIO

COUNTY OF FRANKLIN

For and in consideration of the granting of a permit by the City of Columbus to provide curbside valet drop-off and pick-up services as described in the attached permit for the time period listed, the undersigned does agree to indemnify and hold harmless the City of Columbus, its officers, agents and employees from any and all claims of injury or damages to persons or property arising out of the operation of the curbside valet drop-off and pick-up services.

INDEMNITOR

Signature of Authorized Representative

Print Name

Title

Valet Location (street address)

Business receiving Valet Service

This ______ day of ______20____

(NOTARY PUBLIC)

311 Call Center (614) 645-3111 |Fax (614) 645-3053 50 W. Gay Street | Columbus OH 43215 | (614) 645.8290 |Fax (614) 645.7805

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