

**PERMISSION FOR RIGHT -OF-ENTRY  
AND  
INDEMNIFICATION AGREEMENT  
CITY OF HOKAH MINNESOTA**

The undersigned, Property Owners, hereinafter called the "Owner", executes this "PERMISSION FOR RIGHT-OF-ENTRY AND INDEMNIFICATION AGREEMENT" and grants to the City of Hokah, it's Contractors, sub-contractors, agencies, employees or assigns hereinafter referred to as the "Government" the right-of-entry upon the following terms and conditions:

1. The Owner states and warrants that they are the owners of the subject property located in the City of Hokah, described as follows: \_\_\_\_\_, Hokah, Minnesota and make this representation with the knowledge that the Government is acting in reliance upon said representation.
  
2. The Owner grants to the Government a right-of-entry to enter upon subject land at any time within a period of \_\_\_\_\_ (insert number of days and/or months) from the date of this instrument, in order to remove debris material weather it be vegetative, or aggregate d material for staging and storage for final removal from the area.
  
- 3 The right-of-entry includes the right of ingress and egress on other lands of the Owner not described in Paragraph 1, provided such ingress and egress is necessary and not otherwise conveniently available to the Government
  
- 4 The Owner agrees to indemnify and hold harmless the U S Government, City, County, or State of Minnesota, its employees or agents against any claim, action or cause of action that may be asserted as a result of the act or omissions of the City, County, or State of Minnesota its employees or agents acting pursuant to this Agreement.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2008

Witnesseth:

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
(Print Name) \_\_\_\_\_ Date \_\_\_\_\_

Witnesseth:

\_\_\_\_\_  
Witness Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
(Print Name)

STATE OF MINNESOTA )  
 ) ss.  
COUNTY OF HOUSTON )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 2008, by \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PERSON TAKING ACKNOWLEDGMENT