

**HOLD HARMLESS/INDEMNITY FOR REQUESTED PRIVATE PROVIDER**

RE: PROPERTY LOCATED AT \_\_\_\_\_  
LOT \_\_\_\_\_ AREA \_\_\_\_\_, PLANTATION, FLORIDA.

GENTLEMEN:

I.

As legal Owner or Authorized Agent of referenced property, request to assign a Special Inspector for Permit Number \_\_\_\_\_ issued to \_\_\_\_\_ for the

PERFORMANCE OF PLAN REVIEW       PERFORMANCE OF INSPECTIONS

II.

We/I, \_\_\_\_\_ (name of owner, authorized agent or entity) shall indemnify and hold harmless the CITY OF PLANTATION, and its officers, agents, and employees (including the Building Official), from any and all claims, costs, losses, suits and damages (including, but not limited to, attorney’s fees and other professionals and all court or other disputed resolution costs, liabilities, expenditures, or causes of action of any kind), loss, or damage to the CITY OF PLANTATION, and its said employees, officers and agents may suffer as a result of claims, demands, costs and judgments against it arising from, or pertaining to the above request.

III.

I further assume full responsibility for any or all corrections, if required, of work performed under the above-mentioned request.

DATED the \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_

DATED the \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Special Inspector

\_\_\_\_\_  
Print Name / Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name of Corporation

STATE OF FLORIDA  
COUNTY OF BROWARD

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_, by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_ as identification and acknowledged before me that he/she executed the same and who did not take an oath.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_, by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_ as identification and acknowledged before me that he/she executed the same and who did not take an oath.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC, STATE OF FLORIDA

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC, STATE OF FLORIDA

\_\_\_\_\_  
Printed Name of Notary (Notary Seal)

\_\_\_\_\_  
Printed Name of Notary (Notary Seal)