### CITY OF LOS ANGELES BUREAU OF ENGINEERING

#### PERMIT TO ENTER AND CONSTRUCT

PROJECT TITLE: Sidewalk Repair Program SITE No.:

The undersigned hereby authorizes the City of Los Angeles (City), its officers, agents or employees of firms or corporations under contract with said City, to enter upon the premises known as

# Address and/or Los Angeles County Assessor's Parcel No.:

for the purpose of rebuilding the sidewalk and/or driveway and related construction.

This Permit is subject to the following conditions:

- (1) The City agrees to indemnify and hold the undersigned harmless from loss or liability arising from the acts or omissions of the City, its officers, agents or employees of firms or corporations under contract with said City, during the City's use of the property as described herein. This agreement, however, excludes claims arising from the acts or omissions of the undersigned or the acts or omissions of third parties who are not under the direct supervision or control of the City.
- (2) The City of Los Angeles self-administers, defends, settles and pays third-party claims for bodily injury, personal injury, death and/or property damage. Protection under this program is warranted to meet or exceed ONE MILLION DOLLARS, Combined Single Limit, per occurrence.
- (3) This Permit shall commence upon first entry by City personnel or Contractors employed by the City for the above purpose and shall terminate ninety (90) days thereafter.
- (4) Upon termination of this Permit, the City shall cause to have removed all equipment and materials from the working area and shall have the working area restored to its original condition.

I warrant that I am the owner or that I am authorized to sign for the owner of the subject property.

To be completed by the Property Owner or by the Authorized Agent (Please Print):		
Pool E	Kichard	E
Last Name	First Name	/ Middle Initial
6004 El A	TO LOS AN	Jes 20042
Address Street	City	/ Zip Code
At		3/27/17
Signature(s) of Owner(s) or Auth	orized Agent	Date
Day time phone: $(3/3)$ $425$	7524 Evening phone:	() Sonnt

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To be completed by the Property Owner or by the Authorized Agent (Please Print):		
Menke Anvie B		
Last Name First Name Middle Initial		
GOTO EI Mas Dr. LA 90642		
Address Street City Zip Code  2/28/20/16  Signature(s) of Owner(s) or Authorized Agent Date		
Day time phone: $(2/3 + 43(-8927))$ Evening phone: ( )		