## CITY OF LOS ANGELES BUREAU OF ENGINEERING

## PERMIT TO ENTER AND CONSTRUCT

PROJECT TITLE: Sidewalk Repair Program, BP 22

(W.O.: E1907989)

SITE No.: 683

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.: 18929 Vanowen St Los Angeles, CA 91335

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):

Burci	aga	Melissa	T
Last Name	J	First Name	Middle Initial
18929	Vanaexin	Reasola	91335
Address	Street	City	Zip Code
4			3-31-16
Signature(s)	Date		
Day time pho	ne: ( )	Evening pho	one: (818) <u>605-2644</u>

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teman	de7	Vilma	^	S
Last Name		First Nan	ne	Middle Initial
18435	Vanowen	St. R	es eda	91335
Address	Street	С	ity	Zip Code
Udant	Farance			03/20/20/6
Signature(s	of Owner(s) o	r Authorized Agent		Date /
Day time ph	one: (818) <u>26</u>	3-4918	Evening phone: (5	18) 263-4918

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