

TOWNSHIP OF HILLSIDE

UNION COUNTY, NEW JERSEY MUNICIPAL BUILDING JOHN F. KENNEDY PLAZA 1409 LIBERTY AVENUE HILLSIDE, NEW JERSEY 07205 PHONE: (973) 926-3000; FAX (973) 926-9232 www.Hillside.org

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

This Indemnification and Hold Harmless Agreement ("Agreement") is made between the following Parties:

The Township of Hillside, New Jersey (hereinafter "Township"),

Municipal Building located at John F. Kennedy Plaza Liberty and Hillside Avenues Hillside, New Jersey 07205

- and -

, hereinafter referred to as the "Organization";

Organization's Name

Organization's Telephone Number

Organization's Official Street Address

Contact Person's Name and Telephone Number

Organization is a/an (please circle one of the following):

- Individual
- Non-profit Organization
- For Profit Organization

1. WHEREAS, this Agreement is made in consideration for the granting of a permit by the Township to the **Organization** permitting the use of the Township-owned streets for an event as set forth below, which streets shall be used for the following purpose and no other purpose:

Event:

Time Duration of Event:	
location of Event:	

2. WHEREAS, pursuant to this Agreement, the **Organization**—which shall for purposes of this Agreement include the **Organization's** respective agents, representatives, servants, volunteers, and/or employee—agrees to save, release, indemnify, and hold harmless the **Township of Hillside**, its agents, servants, and/or employees from and against all loss, liability, damages, claims, suits, judgments, and demands, including attorney's fees and expenses incurred by the **Organization** and/or the **Township**, and each of their respective employees, agents, volunteers, or other representatives, from any and all accidents, losses, damages or injuries to persons or property arising out of or in any manner relating to or resulting from the Event which is the subject of the **Organization's** application for a street closure by the **Township**, including the **Organization's** respective agents, representatives, servants, volunteers, and/or employees.

Signed:

Dated: _____

Organization's Representative

Print Name and Title of Organization's Representative