



Community Pride & Neighborhood Pride Cleanup Supply Trailers

Project Coordinator Responsibilities and Waiver Form

Neighborhood/Project Name _____

Project Coordinator _____

Dates of Project _____

The undersigned participant hereby certifies the following: (please initial each item)

1. ___ I am over the age of 18 and will be using the equipment in the Community Pride Cleanup Supply Trailer or Neighborhood Pride Trailer within Montgomery County, Ohio.
2. ___ I understand the written instructions on the proper operation and maintenance of the power equipment in the binder labeled "Montgomery County Community Pride Cleanup Supply Trailer Operator's Manual" stored inside the trailer(s).
3. ___ I will operate all equipment as instructed by the manufacturer's safety guidelines and in conformance with the instructions in the Operator's Manual.
4. ___ I will return any borrowed items from the trailer(s) clean and in working order.
5. ___ I understand that I am responsible to pay for the replacement of any items not returned in the condition in which they were originally received (excluding normal wear and tear).
6. ___ I will not use the trailer(s) or the items in the trailer(s) for commercial purposes.
7. ___ I understand that the use of this equipment may be dangerous and can result in injury or death. I agree to defend, indemnify, hold harmless, and release Montgomery County and any of its departments, agencies, offices, officers and employees from all damages claims, liabilities and expenses, including attorney's fees and legal costs, arising or resulting in any way from delivery, placement, presence, servicing and use of the trailer(s) and the equipment stored within them.
8. ___ From the time the CPCST is delivered and placed until such time as it is removed by Montgomery County, the Project Coordinator will defend, indemnify, hold harmless and release the county and any of its departments, agencies, offices, officers and employees, from all damages, claims or liabilities and expenses, including attorney's fee and legal costs, arising or resulting in any way from delivery, placement, presence, servicing and use of the trailer(s) and equipment stored within them.

(Over)



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The undersigned participant hereby certifies the following:

(Please initial each item)

9. ___ I will ensure the trailer is secured when not being used and all items will be returned. I will meet Montgomery County on _____ at _____ am/pm to inventory the Trailer Equipment List, and return all items identified thereon to Montgomery County.

10. ___ I agree to compensate the Montgomery County Board of County Commissioners for any and all items identified on the Equipment List, which are not returned to Montgomery County for any reason by the date and time identified above.

11. ___ I agree to complete and return the Cleanup Summary Report to Montgomery County within seven (7) days of the project's completion.

Project Coordinator Name (please print) _____

Signature _____ Date _____

Address _____

Phone _____ Email _____

Please return this signed waiver along with the trailer application. All participant waivers can be collected on the day of the event and provided to the Montgomery County Solid Waste District upon the return of the trailer(s).

Montgomery County Solid Waste Emergency Contact:

937-307-9090

Please call 911 for any medical emergency.