



PUBLIC LOCK BOX PROGRAM



Application Date: _____

Owner / Occupant Name: _____

Installation Address: _____

Contact Phone # _____

Emergency Contact Name: _____

Emergency Contact Phone # _____

Application Fee: \$15.00 (Checks payable to the **City of Chicopee**) Fee paid: - _____

Must also sign:

HOLD HARMLESS AGREEMENT AND RELEASE FROM LIABILITY CERTIFICATE (pg. 2)

For office use only:

Station: _____

Site#

FD -

PD -

Installation Date: _____

Installation Location: _____

HOLD HARMLESS AGREEMENT AND RELEASE FORM

LIABILITY CERTIFICATE

I/We, _____,

OF, _____,

Hereby remise, release and forever discharge the City of Chicopee and/or The Chicopee Fire Department of and from all debts, demands, actions, causes of action, suits, accounts, covenants, contract agreements, damages and any and all claims, demands and liabilities whatsoever of every name and nature, both in LAW and EQUITY, which against the said City of Chicopee and/or the Chicopee Fire Department or its heirs and assigns I/we now have or ever had from the beginning of the world to this date and more especially on account of the Chicopee Fire Department's installation of an emergency access lockbox on my home or place of residence.

This release shall be construed and enforced in accordance with, and governed by the laws of the Commonwealth of Massachusetts.

I/We, _____, of my own free will, or for my minor child, my heirs and executors, and myself, have read, understand and acknowledge the risks and liability for myself, and my family,

this _____ day of _____ 20 _____

Date: _____ Signature: _____

Printed Name: _____

IN CASE OF EMERGENCY PLEASE CONTACT:

PHONE: _____