



# Private Property Access



The undersigned, referred to as "Owner" herein, represents that they are the owner or owner's authorized manager of real property (the "Property") located at:

\_\_\_\_\_  
(Street address, including unit number if applicable, City, State, and Zip code)

By signing this form, the owner grants Disaster Recovery Jobs Program (DRJP) participants to pass through their property in order to locate the Worksite located at:

\_\_\_\_\_  
(Street address, including unit number if applicable, City, State, and Zip code)

## PERMISSION

Owner hereby gives the DRJP participants permission to walk through/on Property and bring work equipment onto the Property for the purpose of cleaning up the Worksite referenced above. The owner represents that there are no concealed hazards on the property that DRJP participants will be passing through and that they will have safe access to the areas necessary to clean up and restore damaged area on public property.

## RELEASE

Owner does hereby release and hold harmless the DRJP Participants acting under the permission granted herein, from any and all claims, costs, expenses, damages, suits and liabilities of any kind arising from damage or injury to property or person occurring as a result of the services provided under the Emergency Public Jobs Program.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_ Title \_\_\_\_\_ Phone (area code) \_\_\_\_\_  
(Signature of Owner)

\_\_\_\_\_ (Print Owner's name)

NOTE: if you are signing as the authorized agent or manager for the Owner of the Property, include your title.

Missouri Division of Workforce Development is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Missouri TTY Users can call (800) 735-2966 or dial 7-1-1.

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