## SIDEWALK CAFÉ RENEWAL APPLICATION CITY OF SPOKANE DEPARTMENT OF ENGINEERING SERVICES

808 WEST SPOKANE FALLS BOULEVARD SPOKANE, WA 99201

## (509) 625-6700

(Please PRINT OR TYPE ALL INFORMATION)

Signature: \_\_\_\_\_

Include an 8-1/2 X 11 inch site plan of the sidewalk caféand a fee of \$250.00 (See Sidewalk Café Application Instructions)

## HOLD HARMLESS AND INDEMNITY AGREEMENT

For consideration of permission by the City of Spokane to the undersigned Permittee(s) to

operate a sidewalk café at \_\_\_\_\_\_to be open from \_\_\_\_\_\_to \_\_\_\_\_, between the hours of \_\_\_\_\_\_ and \_\_\_\_\_, the undersigned Permittee(s) agree(s) to indemnify and hold harmless the City of Spokane, its officers, agents, and employees, from any and all liability, claims, actions, judgments, damages, or injuries of every kind and nature whatsoever, by or to any and all persons or property which damage or injury arises out of the above described sidewalk café, whether the liability, claims, actions, judgments, damages or injuries are caused by, or arise out of the negligence of the City of Spokane, its officers, agents, and employees. The Permittee(s) agree(s) to waive all claims against the City of Spokane, its officers, agents, or employees on account of any loss, damage, or injury from whatever cause which may occur to Permittee(s) or Permittee's(s') property, arising out of the above described sidewalk café. Permittee(s) also agree(s) to reimburse the City of Spokane for any damage done to City property, arising out of the sidewalk café.

The undersigned Permittee(s) agree(s) to defend the City of Spokane, its officers, agents, and employees against any claims brought or actions filed against the City of Spokane, its officers, agents, and employees with respect to the sidewalk café, whether such claims or actions are rightfully or wrongfully brought or filed. In case a claim should be brought or an action filed with respect to the sidewalk café, the undersigned Permittee(s) agree(s) that the City of Spokane may employ attorneys of its own selection to appear and defend the claim or action on behalf of the City of Spokane, its officers, agents, or employees, at the expense of the undersigned Permittee(s).

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_,

Permittee(s)

Café Name

**CITY OF SPOKANE** 

Café Address

Department of Engineering Services

Owner Signature

Mailing Address

Approved as to Form:

Assistant City Attorney

By: