

**CITY OF TEMPLE CITY  
GRAFFITI ABATEMENT PROGRAM  
CONSENT TO ENTER AND RELEASE OF LIABILITY**

To the City of Temple City:

The undersigned owner of the property, or agent representing the property owner at the address indicated below, ("Owner"), hereby consents to entry upon said property by personnel and equipment of the City of Temple City's ("City") designated contractor, Graffiti Control Systems ("Contractor") as is necessary to remove, reduce, or obliterate the graffiti on said property by using sandblasting, water blasting, painting, use of solvents and/or similar methods ("Cleaning").

The owner agrees that this consent to enter and release of liability is valid for as long as the property owner owns the property and that all work will be performed at no cost to the owner.

Owner agrees that the cleaning may be in blocks or strips where the graffiti appears and that the cleaned or processed area may not match existing surface texture or color, and that the cleaning will not include the entire surface, but only blocks, patches, or strips thereof, and the Contractor and the City shall not be liable or responsible in any manner if textures and colors do not match or residue of the existing graffiti remains.

Owner hereby requests and authorizes City and Contractor to enter and use said equipment with full knowledge of the above.

Owner hereby releases Contractor and City and their respective officers, agents, and employees of and from any and all liability, damages, injuries, claims, demands, causes of actions or obligations whatsoever arising out of or relating to the entry on the property, any incidental damage to shrubs or plants, the cleaning operations hereinabove referred to, the appearance of said improvements or otherwise.

**Property Owner:**

**Name:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Work Phone #:** \_\_\_\_\_

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

**Business Owner / Resident (If Different From Above)**

**Name / Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Work Phone #:** \_\_\_\_\_

\_\_\_\_\_  
Business Owner or Resident's Signature

\_\_\_\_\_  
Date