HOLD HARMLESS AGREEMENT

(Must be signed by property owner when a contractor presents Exemption Certificate)

Property Address

Name of Contractor

compensation or furnish benefits required be accidental compensable injury or death aris employment. An employer who employs few not to secure payment of compensation unclear written notice in a conspicuous location.	intent of the State Legislature that the employer must pay by Florida Statute Chapter 440, if the employee suffers an ing out of work performed in the course and the scope of wer than four employees, who is permitted by law to elect der that chapter, and who elects not to do so shall post on at each worksite directed to all employees and other of their lack of entitlement to benefits under this chapter.
above noted contractor has presented an in	g Permit to do work, at the above referenced location. The surance exemption certificate and is claiming they will not or which Workers Compensation Insurance is required by
harmless and relieve them from any response (including attorney's for property and which may further result in	rth Bay Village, its agents and authorized personnel, ponsibility or liability for any legal action or damage, ees) resulting from the issuance of a permit on myn any injury to a worker employed by the referenced permit, for whom the contractor is not required by n Insurance.
The undersigned further stipulates that they are fully aware of the Laws of the State of Florida regarding workers compensation coverage.	
Under penalties of perjury, I declare that it are true.	I have read the foregoing and that the facts stated in
Owner's Signature	Print Owner's Name
Date	