

Agreement No.: _____

Received: _____

Expires: _____

GENERAL RELEASE & INDEMNITY AGREEMENT

KNOW ALL PERSONS BY THESE PRESENTS: That _____ legal owner(s) residing at _____ and in consideration of the receipt by him/her/them of _____ yards of chips, dirt, earth, gravel, and/or other soils, to him/her/them in hand delivered at (address): _____, Parcel No. _____ COUNTY OF ISLAND, STATE OF WASHINGTON, does/do by these presents release and discharge the County of Island, State of Washington, its officials, employees, agents and/or contractors of and from all, and all manner of actions and causes to action, judgments, executions, debts, dues, claims and demands, of every kind and nature whatsoever, which now has, or which his/her/their heirs, executors, or administrators have now or may hereafter have by reason of the said delivery of chips, dirt, earth, gravel, and/or other soils to him/her/them.

**NOTE: FILLING WITHIN 100' OF A WETLAND IS PROHIBITED BY LAW.
PLEASE CONTACT THE ISLAND COUNTY COMMUNITY DEVELOPMENT
DEPARTMENT IF YOU HAVE QUESTIONS.**

Said _____ will indemnify and save Island County harmless from and against any and all loss, resulting directly or indirectly from said delivery of chips, dirt, earth, gravel, and/or other soils to him/her/them.

IN WITNESS WHEREOF _____ has hereunto set his/her/their hand this _____ day of _____, 20_____.
(Handwritten signature)

This agreement is in effect for TWO (2) YEARS from date of signing/approval.

(Legal Owner)

STATE OF WASHINGTON
COUNTY OF ISLAND

On this day personally appeared before me _____, proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed it as his/her/their free and voluntary act and deed for the purposes therein mentioned.

WITNESS my hand and official seal this _____ day of _____, 20_____.
[Handwritten signature]

Signature of Notary Public

Exp. Date

SEAL

Printed Notary Name

Residing at



REQUEST FOR FILL

NOTE: FILLING IN EXCESS OF FIVE HUNDRED (500) CUBIC YARDS, OR ANY AMOUNT OF FILL WITHIN 100 FEET OF AN ENVIRONMENTALLY SENSITIVE AREA, REQUIRES A GRADING PERMIT PER ICC 11.01.120. PLEASE CONTACT ISLAND COUNTY PUBLIC WORKS FOR AN APPLICATION.

Date of Request				
Mailing Address				
Site Address (if different)				
Email Address			Telephone #	
Parcel No.				
Road Shop (please circle one)	Coupeville	Oak Harbor	Camano	Bayview
Type of Fill			Amount of Fill in cu. yd. _____	
Requested by	Signature of Owner		Print Name	

Sketch of proposed fill site. Attach additional sheets as appropriate.

Directions to site. If incomplete, action may be delayed.
