



HOLD HARMLESS AGREEMENT

FOR AND IN CONSIDERATION of the grant by the Polly Ann Trail Management Council, Inc. to permit / allow _____ * (name) to _____ (activity) at/on _____ (specific location) _____ (dates & times)

as requested by the undersigned, the undersigned does hereby agree to fully hold harmless, defend and indemnify the Michigan Department of Natural Resources, Polly Ann Trail Management Council, Inc, and all of their officers, officials, employees and members including the Townships of Orion, Addison and Oxford, and the Villages of Leonard and Oxford, with respect to all claims, losses, damages, causes of action, judgments, costs and expenses, including reasonable attorneys fees, whether or not the same are now known, liquidated, discovered, discoverable or justifiable, which may be asserted, brought or rendered against, incurred or suffered by, and/or imposed upon, the Michigan Department of Natural Resources, Polly Ann Trail Management Council, Inc, and all of their officers, officials, employees and members including the Townships of Orion, Addison and Oxford, and the Villages of Leonard and Oxford, and/or their officers, officials, employees by reason of or arising out of the grant or exercise of the rights stated above granted by the Polly Ann Trail Management Council, Inc. to the undersigned.

* Please insert information regarding the title and nature of the activity, date(s), time, and areas that are affected (public sidewalks, streets, parking spaces, etc.)

Witnesses: Two (2) witness signatures are required.

Signature /PRINT NAME BELOW

Signature

Print Name

Signature /PRINT NAME BELOW

Organization and Title

Date Approved: _____

* If the project is related to obstructing the public right of way for work on private property, the signature must be that of the subject property owner or of the contractor performing the work.

Office Use: Copy to: _____ Applicant, _____ Public Safety Department(s)



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF NATURAL RESOURCES
LANSING



DANIEL EICHINGER
DIRECTOR

Dear Applicant:

When insurance is required for an event or other use of state-land the Department of Natural Resources requires the following wording on all insurance policies:

“State of Michigan, its departments, boards, agencies, commissions, officers, and employees are additionally insured”.

This wording should be placed in the Description of Operations section of the insurance certificate. The following may also be put in the Certificate Holder section as a way to indicate where the insurance certificate should be sent, however I am rarely in the office so please email the insurance to vanbloemn@michigan.gov if possible:

**State of Michigan
DNR-PRD
Nikki Van Bloem
525 West Allegan St.
Lansing, MI 48933**

Groups that have “standard” policies must obtain a specific amendment to the policy for the use activity or event. Proof of insurance must be in the possession of the Permittee in order to approve the requested use. The Permittee, Lessee or Concessionaire should also retain possession of the policy and be able to produce it on site upon request.

In accordance with our guidelines we require you to maintain a minimum policy limit, in the amount of specified by the Polly Ann Trail Management Council.

If you have previously submitted a certificate of insurance without the above wording please revise and resubmit your insurance policy as soon as possible for us to continue processing your permit.

Nikki Van Bloem
Southern MI Trail Specialist
Department of Natural Resources
Parks and Recreation Division
vanbloemn@michigan.gov