FRANKLIN TOWNSHIP EQUESTRIAN TRAIL PERMIT APPLICATION

Name: Last	First	Middle Initial
Address:		
Evening Phone:	Day:	
Email:	_	
Driver's License #:		
Vehicle License #: S	State:Vehicle Make:	
Year: Color:		
Trailer License #		
Liability Insurance Carrier:		_ Amount:
Proof of your \$1 million liability i	nsurance must be submitt	ed with your application
copy of the map that shows the booking at all times I have read and signed the Agreement		•
Indemnificati	on and Hold Harmless Agr	eement
In order to qualify for a Franklin on Township-owned open space Agreement must first be signed Additionally, the applicant must Insurance" that shows that the a Generally, this Certificate of Insurance company.	e, the following Indemnificati by the applicant for the equi provide the Township with a applicant has \$1 million of pe	ion and Hold Harmless estrian permit. "Certificate of ersonal liability insurance."
Iindemnify the risks of all conditions existing in t shall assume liability for loss, damage negligence of my actions. I also agre exclusively for the sole purpose stated	or injury sustained by any perse e that the use of said open sp	y the equestrian permit, and son whatsoever by reason of
Signature	 Da	ate
For Official Use Only		

Approved: ____ Disapproved: ____ Date: ____Permit # ____