



Hold Harmless Agreement Form

Customer Name _____

Address _____

City _____ State _____ Zip _____

Phone 1 (____) _____ - _____ Phone 2 (____) _____ - _____

The Customer Requests the Following Health & Safety Accommodations:

- A/I wears a single use mask while indoors.
- A/I wears disposable gloves while on the premises.
- A/I wipes down any ungloved touched surfaces indoors w/disinfectant wipes.
- A/I wears booties while indoors.
- A/I maintains at least 6 feet distance at all times, while indoors.
- A/I not shake hands.
- A/I _____
- Customer does not request any of the above accommodations to be taken by the SLC Auditor/Inspector (A/I).*

Recorded by SLC Staff: _____ Date: _____

HOLD HARMLESS AGREEMENT: I, the below named Customer, hereby release and pledge to hold harmless, the Sustainable Living Center, Washington State University Energy Program, Washington State Department of Commerce, their agents or employees, from and against any liability and all claims for injuries or damage to persons or property, of whatsoever kind or character in connection with the audit, assessment or inspection, or any act or eventuality arising from this work, performed by the SLC and any business/individuals contracted by the SLC to audit, assess or inspect my property listed above.

CUSTOMER CERTIFICATION: By signing and printing my name below with today's date, I the below named customer, agree to give the SLC permission to perform a HEA//FI at my property listed above. I certify that I agree to ALL the terms and conditions as stated in this Hold Harmless Agreement Form.

_____ Date: _____
Customer Signature

_____ CUSTOMER ID NO. _____
Customer Name (PLEASE PRINT)

FOR SLC STAFF USE ONLY	
HEA Date:	Completed By: _____
FI Date:	Completed By: _____