

**PUBLIC SAFETY COMMISSION**

19 South Franklin Street, Cortland, New York 13045

Phone

(607) 756-6221

Fax

(607) 758-8392

**CITY OF CORTLAND**

**POLE BANNER APPLICATION FORM**

Banner Subject/Title \_\_\_\_\_

Contact Name- Please Print \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_

Date \_\_\_\_\_

Install Date \_\_\_\_\_

Display Dates \_\_\_\_\_

Number of Banners \_\_\_\_\_

The Applicant agrees and assumes entire responsibility and liability for losses, expenses, demands, and claims in connection with or arising out of injury or alleged injury (including death) to any person, or for damage or alleged damage to property of the City of Cortland or any person including losses, expenses, or damages sustained by the City of Cortland or any person, sustained or alleged to have been sustained, in connection with or to have arisen out of or resulting from the erection and/or installation of banners pursuant to the City of Cortland Pole Banner Policy as detailed in Section 245-12, Code of the City of Cortland, and agrees to hold harmless the City of Cortland, its agents and employees, from any and all such losses, expenses, damages, demands and claims, and agrees to defend any suit or action brought against the City of Cortland, its agents or employees, based on any such alleged injury or damage, and to pay all damages, costs and expenses in connection therewith or resulting therefrom.

**I HAVE READ AND UNDERSTAND THE INDEMNIFICATION REQUIREMENT SET FORTH ABOVE AND CHAPTER 245-12 OF THE CITY OF CORTLAND CODE, A COPY OF WHICH IS ATTACHED HERETO, AND AGREE TO ABIDE BY SUCH REQUIREMENTS.**

Applicant must furnish the City of Cortland with a copy of their Certificate of Liability insurance listing the City of Cortland as an additional insured in accordance with the City of Cortland’s banner policy.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Relationship to organization \_\_\_\_\_ Date \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_