

ATTACHMENT 1: TOWING APPLICATION, TOWN OF SECAUCUS

INDEMNIFICATION / HOLD HARMLESS

APPLICANT DATA: Please complete:

Tow Operator/Company: _____
Address: _____ City: _____ State: _____ Zip: _____

I, on behalf of the above-named tow operator/company and with authorization, hereby release and hold harmless the Town of Secaucus, any of its Departments and its officers, employees, agents, representatives, officials and assigns, and indemnify them from and against any liability, claims, judgments, losses or expenses to persons or property from any cause, direct or indirect, that may arise out of or is any way connected or associated with the Tow Operator.

Print Name: _____

Title: _____

Signature: _____

Date: _____

******Form shall be submitted with the Application.******