## MOBILE HOME REPLACEMENT PROGRAM RELEASE AND HOLD HARMLESS

APPLICANT:	CO-APPLICANT:
First Name MI Last Name	First Name MI Last Name
Mailing Address	Mailing Address
City State Zip	City State Zip
PROPERTY:	COMMUNITY ACTION AGENCY (CAA):
Property Street	CAA Name
Property City Property State Property Zip	<del></del>
Applicant desires to participate in the Mobile H	ome Replacement Program.
Applicant agrees to assume all risk of injury, ha	arm or damage to his/her person or property which may
arise as a result of the performance of the cont	tract by contractor and does hereby release and agree
to indemnify and hold harmless the CAA and the	he Maine State Housing Authority, their agents, officers
and employees from any and all liability actions	s, damages and claims of any kind and nature
whatsoever for injury or harm that might arise in connection with the use of the construction contract,	
the contractor's performance of the contract and/or applicant's participation in the Mobile Home	
Replacement Program.	
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Date:	
Witness	Applicant
Witness	Co-Applicant