

RELEASE AND INDEMNITY FOR WORK ON PREMISES

KNOW ALL MEN BY THESE PRESENTS that each of the undersigned in consideration of receiving permission from the POLK COUNTY OF TEXAS, with its principal office at 101 West Church Street, Suite 300, Livingston, Polk County, Texas 77351 ("COUNTY") to enter onto COUNTY premise, specifically

Southland Park, Polk County, Texas

(Name of Project and Specific Area of Project)

the receipt of such permission being hereby acknowledged, each of the undersigned hereby releases the COUNTY, its directors, officers, agents, servants, and employees of and from any and all liability, claims, demands, actions, and causes of action whatsoever, arising out of or related to any loss, damage or injury, including death, that may be sustained by any or each of the undersigned, or any property of any or each of the undersigned, while in, on, or upon these premises, or any premises owned by, sanctioned by, or under the control or supervision of the COUNTY, or en route to or from these premises, or any other premises leased to or under control of the COUNTY.

Each of the undersigned being duly aware of the risks and hazards inherent upon entering upon said premises and/or diving upon said premises, hereby elects voluntarily to enter upon said premises, aware of the dangers in association with the present condition and knowing that said condition may become more hazardous and dangerous during the time that each of the undersigned, as well as others, enters upon the premises. Each of the undersigned hereby voluntarily assumes all risks of loss, damage, or injury, including death, that may be sustained by any or each of the undersigned, or any property of any or each of the undersigned while in, on, or upon said premises.

Furthermore, each of the undersigned in consideration of receiving said permission, agrees to release, indemnify and forever hold harmless the COUNTY, its directors, officers, agents, and employees against loss from any and all claims, demands or actions in law or in equity that may hereafter at any time be made or brought by anyone, including the undersigned, for the purpose of enforcing claims for damages or personal injuries in consequence of the undersigned being on said premises. **THIS RELEASE AND INDEMNITY SHALL APPLY EVEN THOUGH THE LOSS OF OR DAMAGE TO PROPERTY OR THE INJURY TO OR SICKNESS OR DEATH OF A PERSON IS CAUSED BY, ARISES OUT OF OR IS RELATED TO, DIRECTLY OR INDIRECTLY, ANY DEFECT IN OR THE CONDITION OF COUNTY'S PREMISES OR TO ANY DEFECT IN OR THE CONDITION OF ANY FACILITIES, EQUIPMENT, TOOLS OR OTHER ITEMS WHICH MAY BE PROVIDED BY COUNTY, WHETHER OR NOT SUCH DEFECT OR CONDITION WAS KNOWN BY COUNTY. THIS RELEASE AND INDEMNITY SHALL APPLY REGARDLESS OF WHETHER OR NOT ANY SUCH DAMAGE TO OR LOSS OF ANY PROPERTY OR ANY SUCH INJURY TO OR SICKNESS OR DEATH OF ANY PESON IS CAUSED BY THE CONTRIBUTING OR CONCURRENT NEGLIGENCE OR FAULT OF COUNTY, ITS EMPLOYEES, OFFICERS, DIRECTORS OR AGENTS AND ALSO EVEN THOUGH COUNTY IS STRICTLY LIABLE FOR ANY SUCH INJURY, SICKNESS, DEATH OR DAMAGE, UNDER THE PROVISIONS OF THIS RELEASE AND INDEMNITY, THE UNDERSIGNED IS AGREEING TO INDEMNIFY COUNTY, ITS EMPLOYEES, OFFICERS, DIRECTORS AND AGENTS FROM THEIR OWN NEGLIGENCE OR FAULT.**

COPY

In witness whereof, each of the undersigned has hereunto set his hand this 6th day of August, 2009.

SIGNATURES:

ATTEST:

County:

By: John P. Thompson
Name Printed: John P. Thompson, County Judge

Jan Hendley

Paul C. Rizzo Associates, Inc.:

WITNESSED:

By: Wm. Daniel Smith

Name Printed: Wm. Daniel Smith

By: Jennifer Ostrawsky

Name Printed: Jennifer Ostrawsky

J. Ostrawsky

Wm. Daniel Smith

Terracon, Inc.

By: Felipe Garcia

Name Printed: FELIPE GARCIA

By: Roger Bauer Jr.

Name Printed: Roger Bauer Jr.

By: Heath Nickamp

Name Printed: Heath Nickamp

By: Michael Johnson

Name Printed: Michael Johnson

By: Anthony Beard

Name Printed: ANTHONY BEARD

By: Curtis Stone

Name Printed: Curtis Stone

Wm. Daniel Smith

Wm. Daniel Smith

Wm. Daniel Smith

Wm. Daniel Smith

Wm. Daniel Smith

Wm. Daniel Smith