

Fripp Island Property Owners Association
RIGHT-OF-ENTRY AGREEMENT

Property Owner: _____

Fripp Island Address: _____ FIPOA Sub/Block/Lot: _____

Mailing Address: _____

Telephone number(s): _____

Right-of-Entry

I certify that I am the owner, or owner's authorized agent, of the property described above. I grant, freely and without coercion, the right of access to said property to the Fripp Island Property Owners Association (FIPOA), its agents, contractors, and subcontractors, for the purpose of removing, and/or clearing any or all storm-generated debris of whatever nature from the above-described property solely for the purpose of providing access to this property and to mitigate and/or minimize any further damage to structures by blue-tarping any structures on the property until I, as owner, can undertake further cleanup and repairs.

Hold Harmless

I understand that this agreement is not an obligation upon FIPOA to perform debris removal or place blue tarps over structures on my property. I agree to hold FIPOA and any of their agents, contractors, and subcontractors harmless from and against liability for damages of any type whatsoever, either to the above-described property or to persons or structures situated thereon, unless such damage results solely from the wrongful acts or gross negligence of FIPOA or its agents, contractors, or subcontractors. I release, discharge, and waive any claim, either legal or equitable, that might arise due to any reasons or actions of the above entities while performing debris removal, adding blue tarps, or performing other damage mitigation on my property, unless such claim results solely from the wrongful acts or gross negligence of the FIPOA or its agents, contractors, or subcontractors.

Financial Responsibility

I understand that I am responsible for reimbursing FIPOA and/or its contractors and subcontractors upon receipt of an invoice for the work performed on my property. Payment to FIPOA and/or its contractors or subcontractors is not contingent upon my being reimbursed by any private insurance company, or by a local, state, or federal agency. FIPOA may file a lien against the property if full payment is not received within 30 days of billing. I hereby deposit the sum of \$1,000.00 to be applied to such reimbursement due to FIPOA. If the costs are less than such deposit, FIPOA is responsible for refunding the difference to me. FIPOA will not take any action that has potential costs in excess of \$5,000 without approval of the owner.

If the deposit is expended, FIPOA has the right to notify the property owner and request it to be replenished immediately. If the deposit is not replenished, the agreement will be terminated.

Deposit will be refunded to owner upon written termination of this agreement by the owner or by FIPOA, or upon notice of the closing of a sale of the property described above.

Print Name (Owner/Agent)

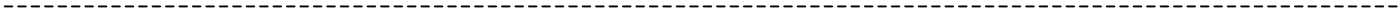
FIPOA Representative

Signature

Signature

Date

Date



Property Owner's Insurance Carrier Information

(FIPOA will not act as intermediary with the agent; this is information only).

Name of Carrier: _____

Address: _____ Telephone No.: _____

Additional comments: _____
