XI: 2nd time I	Signed mis form. 1st time I	t was
Sent Back with	in the 14 day time frame. This	11iw
**	Signed this form. Ist time I win the 14 day time Frame. This me completings this form, you aiver and Consent to Remove or Abate Graffiti vecord of the form. Old	1080
i, Lena	Tollesson, am the owner or person responsible for the	remove
property located at: 99	am the owner or person responsible for the Hubbard ave St. Paul wy 55104. I hereby City of Saint Paul, its agents or employees to remove, cover, paint or	From our
give permission for the C		
otherwise eliminate graf	fiti on the above described property. I understand that the process of	Mank
removing or covering ov	er graffiti cannot restore the damaged surface to its original color or	you.
appearance and may look	different than untouched areas. I understand that by giving this	any
permission, I will hold h	armless the City of Saint Paul, its employees or its agents for the final	questions please call
appearance of my proper	ty. I will further indemnify the City of Saint Paul, its employees or its	call
agents for any claim or c	ause of action that may arise from the removal of graffiti on the property	Me
stated above. I will notif	fy the City of Saint Paul if/when the property changes ownership.	651-399-0121
This waiver will	remain in full force and effect until the City of Saint Paul receives	
written notice to termina	te the waiver and consent to remove or abate graffiti.	
Signature Signature	1/9/17 Date	
To avoid being charge address below within 1	d for abatement please send the Waiver and Consent form to the 4 days or call 651 266-1900 to speak to the inspector or supervisor. Department of Safety and Inspections	
	Code Enforcement 375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806	<i>Martin</i>
Office Use Only Date Waiver Received		
Shared/NHPI/HSG/Forms/waiver	form 2007.doc	