Waiver and Consent to Remove or Abate Graffiti

	I_1 , I_2 I_3 I_4 I_5										
	inch III A										
	property located at: 1054 UNINETCITY MUE. I hereby										
	give permission for the City of Saint Paul, its agents or employees to remove, cover, paint or otherwise eliminate graffiti on the above described property. I understand that the process of										
	removing or covering over graffiti cannot restore the damaged surface to its original color or										
	appearance and may look different than untouched areas. I understand that by giving this										
	permission, I will hold harmless the City of Saint Paul, its employees or its agents for the final										
appearance of my property. I will further indemnify the City of Saint Paul, its employees or it											
agents for any claim or cause of action that may arise from the removal of graffiti on the property stated above. I will notify the City of Saint Paul if/when the property changes ownership. This Waiver and Consent will remain in full force and effect until the City of Saint Pareceives written notice to terminate the Waiver and Consent to remove or abate graffiti.											
						K	Trancer Sulper 16 29 2017 Signature Date				
						To avoid being charged for abatement please send this 'Waiver and Consent' form to the address below within 14 days or call 651 266-8989 to speak to the inspector or supervisor Department of Safety and Inspections					
375 Jackson Street, Suite 220											
Saint Paul, MN 55101-1806											
	OR, you may fax this form to: 651-266-1919										
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	Office Use Only										
	Date Waiver Received										

* * * Communication Result Report (Oct. 30, 2017 12:14PM) * * *

1) TCF BANK LAKE ST E 2) 612-729-8637

Date/Time: Oct. 30. 2017 12:14PM

File No. Mode	Destination	Pg (s)	Result	Page Nct Sent
1985 Memory TX	6512661919	P. 1	OK	

Reason for error
E. 1) Hang up or line fail
E. 3) No answer
E. 5) Exceeded max. E-mail size

E. 2) BLsyE. 4) No facsimile connectionE. 6) Destination does not support IP-Fax

otherwise eliminate graffiti on the above described property. I understand that the process of removing or covering over graffiti cannot restore the damaged surface to its original color or appearance and may look different than antouched areas. I understand that by giving than permission, I will hold humbers the City of Saint Paul, its employees or its agents for the final appearance of my property. I will further indemnify the City of Saint Paul, its employees or its agents for any claim or cause of action that may mise from the removal of graffiti on the property stated above. I will notify the City of Saint Peal if/when the property changes ownership.

This Waiver and Conscot will remain in full force and effect until the City of Suint Paul

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Department of Safety and Inspections

Code Enforcement

Saint Paul, MN 55101-1806

OR, you may fux this form to: 651-266-1919 Office Use Only Date Waiver Received

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