



## **TOWNSHIP OF SHREWSBURY**

**MUNICIPAL OFFICE  
1979 CRAWFORD STREET  
SHREWSBURY TOWNSHIP, NEW JERSEY 07724  
PHONE: 732-542-0572  
FAX: 732-935-1348**

### **HOLD HARMLESS/INDEMNIFICATION AND INSURANCE AGREEMENT**

1. The undersigned vendor shall save and hold the Township of Shrewsbury harmless from, and against, all liability, damage, loss, claim, demands and actions of any nature whatsoever that arises out of, or are connected with, or is a claim to arise out of, or connected with, participation in the “\_\_\_\_\_” located at \_\_\_\_\_ and other designated locations, or claims made by the vendor or any individual using, occupying, visiting or maintaining the vendor’s area of use or equipment, and shall indemnify and reimburse the Township of Shrewsbury for any costs, claims, settlements or judgments arising from the vendor’s participation in the Shrewsbury Township Activity and incurred in Shrewsbury Township.

2. The undersigned vendor must provide proof of insurance in the form of Certificate of Liability Insurance with limits of liability described below:

- a. Worker’s Compensation/Employer’s Liability: Not less than \$1,000,000.00;
- b. General Liability: Not less than \$1,000,000.00;
- c. Umbrella Liability Policy: No less than \$1,000,000.00.

3. A true copy of the Certificate of Liability Insurance shall be provided at the time of execution of this Agreement indicating that the “Township of Shrewsbury” is named as an additional insured on all liability policies, and shall be notified in case of cancellation

Witness:

VENDOR:

By: \_\_\_\_\_

Print name:

Print title:

By: \_\_\_\_\_

Print name:

Print title:

Date: \_\_\_\_\_

Date: \_\_\_\_\_