



SHORE DRIVE APARTMENTS, INC.

Coral Ridge Towers East

3300 N.E. 36TH ST., FORT LAUDERDALE, FLORIDA 33308 • (954) 566-4323 • FAX (954) 537-9105

THIS WAIVER FORM is to be added to the APPLICATION FOR ALTERATION FORM and signed by the Shareholder of the Unit requesting the Alteration in the event the Shareholder intends to hire *anyone* not having the following qualifications and documentation as follows:

1. FURNISH PROOF THAT THEY HAVE A CURRENT AND VALID LICENSE TO DO BUSINESS IN BROWARD COUNTY, FLORIDA (CURRENT OCCUPATIONAL LICENSE).
2. FURNISH PROOF THAT THEY HAVE A CURRENT LIABILITY INSURANCE FLORIDA (CERTIFICATE OF LIABILITY INSURANCE).
3. FURNISH PROOF THEY HAVE CURRENT AND VALID WORKER'S COMPENSATION INSURANCE. (CERTIFICATE OF INSURANCE), **OR**
4. FURNISH PROOF OF WORKER'S COMPENSATION INSURANCE EXEMPTION CERTIFICATE IN ACCORDANCE WITH APPLICABLE STATE OF FLORIDA RULES AND REGULATIONS.

WAIVER

I do hereby understand and take full responsibility in the hiring of _____

_____, Address _____
_____, Business Tel. No. _____.

I am aware any person working for hire on the property of Shore Drive Apartments, Inc. dba Coral Ridge Towers East is required to show Proof of Insurance as outlined above, including Current Occupational License, Certificate of Liability Insurance and Worker's Compensation Insurance or valid Worker's Compensation Insurance Exemption Certificate. I am also aware that it is my responsibility to acquire all Permits required for the work by the City of Fort Lauderdale and other government entities as required.

Shareholder agrees to assume liability incidental to the hiring of any service provider to provide services or perform any work at Coral Ridge Towers East and claims of any nature or any expenses, including attorney's fees, arising out of the hiring of said service provider and further agrees to indemnify, hold harmless, release and forever discharge Shore Drive Apartments, Inc. dba Coral Ridge Towers East from all claims, demands and actions of any kind or nature, which may arise as a result of the hiring of any service provider at Coral Ridge Towers East.

DATE _____

SHAREHOLDER

Apt. #

By _____
Chairperson, Building & Grounds Committee

Recommend Approval _____

Recommend Approval _____

MANAGER