



SALISBURY DISTRICT COUNCIL



FORM OF INDEMNITY

1. That I,, (the duly authorised representative of and with the necessary authority to enter into this Indemnity on its behalf) agree that:
2. The Council will not be liable for the death or injury to any person attending the Facility for the function the subject of the hiring or for any losses expenses or other costs incurred by the Hirer except where such death injury or loss is due solely to the negligence of the Council or anyone authorised on its behalf.
3. The Council will not in any circumstances accept responsibility or liability in respect of any damage to or loss of any goods articles or property of any kind brought into the Facility or left at it either by the Hirer or by any other person or left with any employee of the Council.
4. The Hirer is not to cause any damage to be done to the Facility and except to the extent that the Council may be indemnified by insurance the Hirer is to make good and pay for any such damage caused by any act or neglect of the Hirer or anyone for whom the Hirer is responsible or anyone permitted by the Hirer to enter the Facility.
5. The Hirer shall be responsible for any losses expenses or other costs as are mentioned in the above clauses and shall maintain a policy of Public Liability insurance in the minimum sum of £5m in respect of any one incident to cover such responsibility.
6. The Hirer will on request by the Council immediately produce to the Council a certified copy of its insurance policy taken out for the purposes of this Indemnity and satisfactory evidence that the premium has been paid and is up to date.

Agreed and signed by Hirer

Address

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Please print name

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Contact Telephone Number

Date

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Site / Facility: Hire Dates:

Brief Outline of event:

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For Office Use:

Insurance Cover seen: yes

Policy Number

Indemnity Limit (£)

Renewal Date

Insurance Company Name/Address