

**RIVERSIDE COUNTY FLOOD CONTROL  
AND WATER CONSERVATION DISTRICT**

Application for No - Fee Access Permit

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company/Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone No.: (\_\_\_\_) \_\_\_\_\_ Cell No.: (\_\_\_\_) \_\_\_\_\_

Activity for which access is being requested (attach additional sheets as needed) \_\_\_\_\_

When access to District right of way is for the purpose of environmental surveys, please submit copies of the survey results to the District.

Facility Name(s) and proposed activity limits (Please include an exhibit(s) showing the approximate location/boundary of the above described activity): \_\_\_\_\_

Duration and timing for each individual facility for which activity under this No-Fee Access Permit is being requested (attach additional sheets as needed):

Facility Name: \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
Start Date Completion Date

If checking out a Key, please complete the following:

Vehicle Make & Model: \_\_\_\_\_ License Plate No.: \_\_\_\_\_

Please submit (mail/fax) to the District the Access Start Notice Form (Sheet 6) a minimum of five (5) working days prior to beginning activity for which access onto District right of way is being requested, if access is not going to be taken immediately.

Please do not write below this line.

**Access Permit Authorization**

Access Permit Number: \_\_\_\_\_ Key No.: \_\_\_\_\_

Authorization Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Recommended for Approval: \_\_\_\_\_

Approval: \_\_\_\_\_

CASSANDRA SANCHEZ – Senior Civil Engineer

Please keep a copy of this document while on District right of way.

**RIVERSIDE COUNTY FLOOD CONTROL  
AND WATER CONSERVATION DISTRICT**

**RELEASE AND INDEMNIFICATION**

Please read carefully before signing.

Proposed Activity: \_\_\_\_\_  
\_\_\_\_\_ ("Activity")

In consideration of the permission granted to me by the Riverside County Flood Control and Water Conservation District ("District"), as the landowner of the property on which the Activity is to take place, \_\_\_\_\_ ("Site"), I, the undersigned, agree as follows:

1. I understand the term Site includes the above-mentioned location as well as the immediate adjacent areas in and bordering and the term Activity includes travel to and from the Site.

2. I understand that the permission granted under this No-Fee Access Permit by the District does not authorize the Company/Agency and its representatives to trespass on any land or property not owned in fee by the District and does not relieve the Company/Agency and its representatives of responsibility for compliance with applicable federal, state, or local laws/ordinances. It is acknowledged that this No-Fee Access Permit is for access to land owned by the District in fee not in easement. Land subject to a District easement is not authorized for access pursuant to this No-Fee Access Permit unless the applicant provides the necessary document(s) from land owner authorizing such access.

3. I FULLY RECOGNIZE THE DANGERS OF PARTICIPATING IN THE ACTIVITY, AND I VOLUNTARILY ASSUME ALL RISKS ASSOCIATED WITH MY PARTICIPATION. The dangers that I may encounter include, by way of example only and without limitation:

rattlesnakes, ticks, yellow jackets, bees, wild animals, poison oak, rugged terrain, slippery rocks, cliffs, cactus spines, dense vegetation, fire, harsh and quickly changing weather conditions, and stinging nettles.

I realize that there is a risk of my becoming seriously ill or injured in an area remote from medical care and that the District and/or the County of Riverside ("County") cannot guarantee the availability of emergency medical services or emergency transportation to medical facilities.

4. I have been properly instructed in and understand the use of any equipment I am to use in the Activity. I realize that my participation in the Activity may require sustained strenuous physical activity. I am in good health, and am not aware of any physical or medical condition that might endanger myself or other participants in the Activity. If I am taking any prescribed medication, I agree to carry such medication with me at all times.

5. ACTING ON BEHALF OF THE COMPANY/AGENCY AND REPRESENTATIVES, I AGREE TO INDEMNIFY AND HOLD HARMLESS DISTRICT (INCLUDING ITS DIRECTORS, OFFICERS, BOARD OF SUPERVISORS, ELECTED AND APPOINTED OFFICIALS, EMPLOYEES, AGENTS AND REPRESENTATIVES) FROM ANY LIABILITY, CLAIM, DAMAGE, PROCEEDING OR ACTION, PRESENT OR FUTURE, BASED UPON, ARISING OUT OF OR IN ANY WAY RELATING TO THIS NO-FEE ACCESS PERMIT. FURTHERMORE, I AGREE THAT

INFORMATION OBTAINED UNDER THIS NO-FEE ACCESS PERMIT SHALL NOT BE USED AGAINST THE DISTRICT'S INTERESTS IN CONDUCTING MAINTENANCE ACTIVITIES, REPAIRING AND/OR EXPANDING AN EXISTING FACILITY OR CONSTRUCTING A PROPOSED FUTURE FACILITY.

6. ACTING FOR MYSELF AND MY HEIRS, PERSONAL REPRESENTATIVES, EXECUTORS, ASSIGNS AND GUARDIANS AD LITEM, I HEREBY RELEASE THE DISTRICT AND COUNTY AND EACH OF THEIR RESPECTIVE EMPLOYEES, REPRESENTATIVES, VOLUNTEERS, CONTRACTORS, OFFICERS AND DIRECTORS, (COLLECTIVELY REFERRED TO AS "AGENTS") FROM ANY AND ALL CLAIMS AND LIABILITY FOR INJURY TO OR DEATH OF ANY PERSON, INCLUDING ME, AND FOR DAMAGE TO OR LOSS OR DESTRUCTION OF ANY PROPERTY, INCLUDING MY OWN, ARISING FROM OR RELATED TO MY PARTICIPATION IN THE ACTIVITY OR DURING TRAVEL TO OR FROM THE SITE WHETHER OR NOT RESULTING FROM THE NEGLIGENCE OF THE DISTRICT AND/OR COUNTY, AND/OR THEIR RESPECTIVE AGENTS.

7. ACTING FOR MYSELF AND MY HEIRS, PERSONAL REPRESENTATIVES, EXECUTORS, ASSIGNS AND GUARDIANS AD LITEM, I AGREE NOT TO MAKE A CLAIM AGAINST, SUE OR ATTACH THE PROPERTY OF THE DISTRICT AND/OR COUNTY AND/OR THEIR RESPECTIVE AGENTS FOR INJURY OR DAMAGE RESULTING FROM THE NEGLIGENCE OR OTHER ACTS OR OMISSIONS, HOWSOEVER CAUSED BY THE DISTRICT AND/OR COUNTY AND/OR THEIR RESPECTIVE AGENTS ARISING FROM MY PARTICIPATION IN THE ACTIVITY OR DURING MY PRESENCE ON OR TRAVEL TO AND FROM THE SITE. I FURTHER AGREE TO INDEMNIFY, DEFEND AND HOLD HARMLESS THE DISTRICT AND COUNTY AND THEIR RESPECTIVE AGENTS FROM ANY AND ALL CLAIMS AND LIABILITIES FOR INJURY TO OR DEATH OF THE UNDERSIGNED, AND FOR DAMAGE TO OR LOSS OR DESTRUCTION OF PROPERTY OF THE UNDERSIGNED ARISING FROM MY PARTICIPATION IN THE ACTIVITY OR DURING MY PRESENCE ON OR TRAVEL TO OR FROM THE SITE WHETHER OR NOT RESULTING FROM THE NEGLIGENCE OR OTHER ACTS OR OMISSIONS OF THE DISTRICT AND COUNTY AND/OR THEIR RESPECTIVE AGENTS.

8. I EXPRESSLY AGREE THAT NO WARRANTY OR REPRESENTATION OF ANY KIND WHATSOEVER HAS BEEN GIVEN ME REGARDING THE CONDITION OF THE SITE OR ANY FACILITIES OR EQUIPMENT THEREON OR ANY MEANS OF TRANSPORTATION TO AND FROM THE SITE, AND AGREE FURTHERMORE, THAT THE DISTRICT AND COUNTY AND THEIR RESPECTIVE AGENTS SHALL NOT BE LIABLE FOR ANY ALLEGED NEGLIGENCE OR OTHER ACTS OR OMISSIONS PERTAINING THERETO.

9. I ASSUME FULL LIABILITY FOR ANY INJURY TO OR DEATH OF ANY PERSON ARISING BY REASON OF MY PARTICIPATION IN THE ACTIVITY PRESENCE ON THE SITE OR TRAVEL TO OR FROM THE SITE OR FOR ANY DAMAGE TO OR LOSS OR DESTRUCTION OF PROPERTY ON THE SITE CAUSED BY ME.

10. IF A KEY HAS BEEN ISSUED TO ME, I AGREE TO SAFEGARD THE KEY ENTRUSTED TO ME AND TO RETURN THE KEY NO LATER THAN \_\_\_\_\_.

I HAVE CAREFULLY READ THIS RELEASE AND FULLY UNDERSTAND ALL OF ITS CONTENTS AND LEGAL AFFECTS. I AGREE THAT THIS RELEASE IS CONTRACTUALLY BINDING, AND I SIGN IT OF MY OWN FREE WILL.

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

Print Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_



**RIVERSIDE COUNTY FLOOD CONTROL  
AND WATER CONSERVATION DISTRICT**

**Access Start Notice Form**

(Email or mail to be received a minimum of 5 (five) days prior to start of activity)

To: Permit Inspector

Re: Access Permit No. \_\_\_\_\_

From: \_\_\_\_\_

Name

\_\_\_\_\_

Title

\_\_\_\_\_

Company/Agency Name

\_\_\_\_\_

Address

Activity authorized under the above referenced Access Permit: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This activity will commence on \_\_\_\_\_ and is scheduled to be completed by \_\_\_\_\_.

In the event these dates change, another notification will be submitted to the District.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This form shall be either emailed or mailed to be received a minimum of five (5) working days prior to beginning the activity described above.

Mailing Address: Riverside County Flood Control and Water Conservation District  
1995 Market Street  
Riverside, CA 92501  
Attn: Plan Check

Email: fkassem@rivco.org