

SEMINOLE TRIBE OF FLORIDA

ADAM NELSON
Tribal Community
Development
Executive Director

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Tribal Officers:

JAMES E. BILLIE
Chairman

TONY SANCHEZ, JR.
Vice Chairman

PRISCILLA D. SAYEN
Secretary

MICHAEL D. TIGER
Treasurer

Tribal Member No. _____

Vendor No. _____

MAINTENANCE SERVICE LIABILITY WAIVER

I _____ (Print Tribal Member/Tenant name) consent to any and all requested or required services provided in my absence at my dwelling place by the Seminole Tribe of Florida Housing and/or Infrastructure Departments. In addition to consenting to performance of said services, in my absence, I also agree to hold harmless the Seminole Tribe of Florida Housing and/or Infrastructure Departments, the Seminole Tribe of Florida and any of its affiliates from any and all damages or losses sustained in my dwelling and/or the contents thereof.

Tribal Member/Tenant's Signature

Date

I _____ (Print Tribal Member/Tenant name) do not consent to any and all requested or required services to be provided at my dwelling, in my absence by the Seminole Tribe of Florida Housing and/or Infrastructure Departments. I chose to be present at the time of service and will exercise all efforts with the Seminole Tribe of Florida Housing and/or Infrastructure Departments to coordinate a date and time for completion of requested or required services.

Tribal Member/Tenant's Signature

Date