

Village of Albers
ALTERNATIVE VEHICLE PERMIT INFORMATION

Permit # _____

Date: _____

Applicant: _____
(LAST) (FIRST) (M)

Address: _____

Driver's License # _____

Alternative Vehicle _____

Make/Model _____

Serial # _____

Insurance Provider _____

Insurance Policy # _____

Insurance Expiration Date _____

Instructions:

1. Complete this application and submit to Village Clerk.
 2. Submit \$20 payment. Checks made payable to "Village of Albers".
- *NOTE: Applicants over the age of 75 are exempt from the \$20 payment.
3. Application/payment may be submitted in person to Albers Village Hall or electronically at www.albersil.org.

This permit expires May 01, _____

I have received and read the Village of Albers ordinances regarding this Alternative Vehicle Permit. I understand when operating this alternative vehicle on Village streets that I am required to renew this permit annually, which requires proof of insurance and may be subject to inspection. I further understand as owner of this vehicle; I and any other operators must adhere to all Village ordinances and State laws. By signing this application, I agree to maintain liability insurance in accordance with all Village ordinances.

Signature: _____

Office Use Only:	
Inspection Form	_____ (Required for first-time permits or as directed)
Hold Harmless Form	_____ (Required for first-time permit.)
Village Representative:	_____
Date	_____
Payment Received	Cash_____ Check_____ PayPal_____

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**UNCONDITIONAL AND FULL GENERAL RELEASE OF LIABILITY, WAIVER,
DISCHARGE, AND COVENANT NOT TO SUE**

This is a legally-binding UNCONDITIONAL AND FULL GENERAL RELEASE OF LIABILITY, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE made by me, _____ (hereinafter referred to as Operator) to Village of Albers (hereinafter referred to as the Village).

I FULLY RECOGNIZE THAT THERE ARE DANGERS AND RISKS TO WHICH I MAY BE EXPOSED BY OPERATING AN ALTERNATIVE VEHICLE ON VILLAGE STREETS. THE FOLLOWING ARE DESCRIPTIONS AND/OR EXAMPLES OF SIGNIFICANT DANGERS AND RISKS ASSOCIATED WITH THIS ACTIVITY: INJURY TO MYSELF OR OTHERS, DAMAGE TO MY PROPERTY OR THAT OF OTHERS, DEATH OF MYSELF OR OTHERS.

IN NO EVENT SHALL THE VILLAGE BE LIABLE FOR DIRECT, INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGES, WHETHER ARISING IN TORT, CONTRACT OR ANY OTHER LEGAL THEORY, IN CONNECTION WITH OR ARISING OUT OF OPERATOR'S USE OF AN ALTERNATIVE VEHICLE ON VILLAGE STREETS.

THE OPERATOR, AS OF THE DATE BELOW, SHALL HEREINAFTER SAVE, HOLD HARMLESS AND INDEMNIFY THE VILLAGE AGAINST ANY AND ALL LIABILITY, CLAIMS, CAUSES OF ACTION, AND COSTS OF WHATSOEVER KIND AND NATURE INCLUDING, WITHOUT BEING LIMITED TO INJURY, DAMAGE, LOSS INCLUDING DEATH, RESULTING FROM, ARISING OUT OF, OR OCCURRING IN CONNECTION WITH MY USE OF THIS ALTERNATIVE VEHICLE ON VILLAGE STREETS.

I understand that the Village has an ordinance governing the use of qualified alternative vehicles on Village streets and hereby agree to conform with all requirements of the Village ordinances at all times. I have had the opportunity to read said ordinance and the 'Rules Concerning Alternative Vehicles for the Village of Albers' and my signature below acknowledges that I will comply with this ordinance and said rules as well as all of the applicable traffic laws of the State of Illinois at all times when operating this vehicle on Village streets.

I, THEREFORE, AGREE TO ASSUME AND TAKE UPON MYSELF ALL OF THE RISKS AND RESPONSIBILITIES IN ANY WAY ASSOCIATED WITH THIS ACTIVITY. IN CONSIDERATION OF AND RETURN FOR THE OPPORTUNITY TO OPERATE AN ALTERNATIVE VEHICLE VILLAGE STREETS, I RELEASE THE VILLAGE (AND THE VILLAGE TRUSTEES, EMPLOYEES, AND AGENTS) FROM ANY AND ALL LIABILITY, CLAIMS AND ACTIONS THAT MAY ARISE FROM INJURY OR HARM TO ME OR OTHERS, INCLUDING DEATH, OR FROM DAMAGE TO MY PROPERTY OR PROPERTY OF ANY OTHER IN CONNECTION WITH THIS ACTIVITY. I UNDERSTAND THAT HIS RELEASE ALSO COVERS LIABILITY, CLAIMS AND ACTIONS CAUSED ENTIRELY OR IN PART BY ANY ACTS OR FAILURES TO ACT, INCLUDING BUT NOT LIMITED TO NEGLIGENCE, MISTAKE, OR FAILURE TO ENFORCE, SUPERVISE, OR MAINTAIN.

I assure the Village that there are no health-related reasons or problems which preclude or restrict my participation in this activity. I further assure the Village that I have adequate liability insurance necessary to provide for and pay any medical costs or property damage that may directly or indirectly result from my participation in this activity, and I will indemnify and hold the Village harmless for any such medical costs or property damage.

I understand that this release means I am giving up, among other things, rights to sue the Village, its Village Trustees, employees, and/or agents for injuries (including death), damages, or losses I may incur or cause. I also understand that this Release binds my heirs, executors, administrators, and assigns, as well as myself.

I HAVE READ THIS ENTIRE RELEASE, I FULLY UNDERSTAND IT, AND I AGREE TO BE LEGALLY BOUND BY IT.

WITNESS:

OWNER Signature

DATE:
