

**Waiver for Free Graffiti Removal**



**- CONSENT TO ENTER AND RELEASE OF LIABILITY -**

**This form can be completed and submitted electronically at [www.nyc.gov/graffitifreeNYC](http://www.nyc.gov/graffitifreeNYC)**

**Step 1: Read and Sign**

As the Property Owner or authorized representative of the Property Owner, I grant consent to the City to enter the property identified below in "Step 2" for the purpose of removing graffiti. For the purposes of this Consent, "the City" means personnel and equipment of the City of New York, its agents and employees and/or a community organization designated by the City. The City may remove graffiti in the manner it deems appropriate, including but not limited to, by power-washing, painting or the use of chemical solvents.

The City will, in good faith, attempt to remove the graffiti from the property. However, by signing below, I understand that: 1) the graffiti removal services shall be performed as deemed appropriate by the City; 2) the City does not in any way obligate itself to perform any graffiti removal services other than those deemed appropriate by the City; and 3) the City assumes no responsibility if the area cleaned or painted by the City does not match the remainder of the property, or if some residue of existing graffiti remains. I indemnify and hold the City harmless from any liability for physical injury, death, or property damage arising from the performance of graffiti removal services on the property pursuant to this Consent, unless such liability arises entirely from the actions or conduct of the City, its agents, employees, or independent contractors. This Consent shall be effective until terminated in writing by the Property Owner, or by the Authorized Representative of the Owner.

(Check one):  Property Owner  
 Authorized Representative of Owner

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

\_\_\_\_\_ Property Owner Name (if signed by Authorized Representative)

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

\_\_\_\_\_ Property Owner Phone Number

**Step 2: Provide Contact Information of Property with Graffiti**

Name of Business (if applicable): \_\_\_\_\_

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

Borough and Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Step 3: Choose Cleaning Method (optional)**

(Check one: Paint Color -or- Power Wash)

**Paint Color:** Gray \_\_\_ Brick Red \_\_\_

Black \_\_\_ White \_\_\_

Other (specify) \_\_\_\_\_

**Power Wash:** \_\_\_\_\_

**Step 4: Return by MAIL or FAX to**

Office of the Brooklyn Borough President

Community Service Center

209 Joralemon Street

Brooklyn, NY 11201

Fax: (718) 802-3881

It is recommended that you retain a copy of the completed waiver for your records and alert any tenants or lessees of the upcoming graffiti cleaning.

**Office Use Only: SR#:** \_\_\_\_\_

**DSNY:**

**PD:**

**IBZ:**