



2016 Request for Chipping

Contact Information

Name _____

Telephone _____

Email _____

Assessors Parcel # _____

Address: _____

City/ Zip: _____

Nearest cross street: _____

Are you the owner of the property Yes No

Owners Name & Contact Phone (if different): _____

Chipper Information(to be completed after project acceptance)

Number of stacks: _____ Do you want the chips left on site?

Total size of stacks combined: Width ___ Length ___ Height ___ All chips will be removed and recycled unless otherwise requested.

Approximately how many acres of property did you clear? _____

Where is the material?
 At the curb On shoulder of a paved road Along paved drive

What would you do with this material if this program were not available?
 Leave on property Chip Take it to recycling
 How many miles (round trip) is that? _____

Community Match

We can count the effort it took you to prepare these stacks as matching funds for our grant

How many hours did it take you to prepare your stacks? _____ hours

If you hired someone to cut and stack for you, how much would it cost? \$ _____

By signing below, I agree to the following terms and conditions:

1. I agree to allow the City of Hayward private contractor onto my property.
2. If I have requested to have the material chipped back onto my property, I will comply with the chipping crews' decisions as to where chipped material is deposited.
3. I understand the City of Hayward private chipping company has final authority to determine if a pile is suitable for chipping.
4. I understand that if the pile is not prepared per the checklist, it will not be chipped. No trash, stumps or piles containing dirt, rocks, wire, lumber, spiny plants, poison oak or blackberries allowed.
5. I understand that City of Hayward is not obligated to perform this service and that City of Hayward is not liable for its failure to perform this service or for the negligent performance of this service. City of Hayward provides the contractors with a preferred weekly schedule but final decisions for scheduling of chipping are made by the contractor.

The applicant agrees to hold harmless, indemnify, and to defend the City of Hayward and its employees from and against any and all claims for injury or damage arising from or connected with the work associated with this request, except for any such claim arising solely out of negligent acts or omissions attributable to the City of Hayward and its employees.

Signature

Date

Return this form either by fax: 510-583-3640, email: hfd@hayward-ca.gov, or mail: Hayward Fire Department, Attn: Fire Administration, 777 B St., Hayward, CA 945412