INDEMNIFICATION AGREEMENT FORM

I/We	BARB MI	LLER			do I	hereby
own	edge that I/We are awa property	are that by leg	installing o ally	ur own septic described		on our
	Northeast Quarter of the ying Easterly of the cente					wnship
Permit Nu	umber					
conformi	taking the risk of daring septic system may dable lot. I/we may h	not be able	e to be instal	led and I/We n	nav and u	ın with
to and co	er agree to hold Aitkinges that may be incurred omply with the proving the proving the contract of the contrac	ed by Aitkii	n County due	to my/our fail	lure to co	nform
Banka (Property	Owner)					
(Property	Owner)					
Subscribe this 4 M D	d and sworn to me Day of Moul., 20 Z Notary	7 (NOT MY C	MARCIA J. HILLS ARY PUBLIC - MINNESOT Comm. Exp. Jan. 31, 202	TA SECOND	
Approved	(Department Repres	Lonsol sentative)	, Dated	1 <u> 11-4-20</u> 2	22	

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