

TOWN AVON

Developer/Owner owns at

POLICE, FIRE & MEDICAL EMERGENCY - 911

TOWN MANAGER'S OFFICE Tel (860) 409-4300 Fax (860) 409-4368

ASST. TO THE TOWN MANAGER

Tel. (860) 409-4377 Fax (860) 409-4368

ACCOUNTING Tel. (860) 409-4339

Fax (860) 409-4366

ASSESSOR'S OFFICE Tel. (860) 409-4335

Fax (860) 409-4366

BUILDING DEPARTMENT

Tel. (860) 409-4316 Fax (860) 409-4364

COLLECTOR OF REVENUE

Tel. (860) 409-4306 Fax (860) 677-8428

ENGINEERING DEPARTMENT

Tel. (860) 409-4322 Fax (860) 409-4364

FINANCE DEPARTMENT

Tel. (860) 409-4339 Fax (860) 409-4366

FIRE MARSHAL

Tel. (860) 409-4319 Fax (860) 409-4364

HUMAN RESOURCES

Tel. (860) 409-4303 Fax (860) 409-4368

281 Huckleberry Hill Rd. Tel. (860) 673-3677

PLANNING & ZONING

Tel. (860) 409-4328 Fax (860) 409-4364

POLICE DEPARTMENT Tel. (860) 409-4200

Fax (860) 409-4206

PROBATE

Tel. (860) 409-4348 Fax (860) 409-4368

PUBLIC LIBRARY

281 Country Club Road Tel. (860) 673-9712 Fax (860) 675-6364

PUBLIC WORKS

11 Arch Road Tel. (860) 673-6151 Fax (860) 673-0338

RECREATION AND PARKS

Tel. (860) 409-4332 Fax (860) 409-4366 Cancellation (860) 409-4365

REGISTRAR OF VOTERS

Tel. (860) 409-4350 Fax (860) 409-4368

SOCIAL SERVICES

Tel. (860) 409-4346 Fax (860) 409-4366

TOWN CLERK

Tel. (860) 409-4310 Fax (860) 677-8428

TDD-HEARING IMPAIRED

Tel. (860) 409-4361

60 West Main St. Avon, CT 06001-3743 www.avonct.gov

, Avon, Connecticut,

ENCROACHMENT IN THE RIGHT-OF-WAY AGREEMENT

This agreement, dated this	day of	20, by and bet	ween the
Town of Avon (the "Town"), a r	nunicipal corporation, in the	County of Hartford,	State of
Connecticut, acting herein by its To	own Engineer, and		
("Developer/Owner"), of	, County of	f	, State of
Be it known that the above Develo	oper/Owner has performed cor	nstruction which incl	ludes the
installation of trees, shrubs, or other	r vegetation (excluding grass be	elow six (6) inches in	height);
structures; and/or utilities within	the Town's property, located	d at or adjacent to	property

ENTER A DESCRIPTION OF THE ENCROACHMENT HERE. (referred to herein as the "Encroachment")

("Developer/Owner's Property") such installation more particularly described below:

Whereas Developer/Owner has installed the Encroachment, and whereas, with this agreement, Developer/Owner, their heirs and assigns, hereby agree to assume full and complete responsibility, at Developer/Owner's cost, for (1) maintenance, repair, and removal of the Encroachment and (2) liability for any damages which may occur as a result of the installation, maintenance, and/or existence of the Encroachment;

Whereas Developer/Owner, including Developer/Owner's heirs and assigns, further agrees to begin to remove or modify, as may be requested by the Town, the Encroachment within 48 hours of receipt of a written notice for such removal or modification from the Town and to complete removal or modification within seven (7) days;

Whereas, notwithstanding the foregoing, if Developer/Owner fails to remove or modify the Encroachment as required by this Agreement, the Town shall have the right, at its sole discretion, to arrange for removal or modification of the Encroachment at Developer/Owner's cost. If the Developer/Owner fails to reimburse the Town for costs associated with the removal or modification of the Encroachment within seven (7) days of the Town's reasonable attempt to notify Developer/Owner of such costs, the Town may place a lien on the Developer/Owner's Property in an amount equal to the costs incurred by the Town for such removal or modification.

Now therefore, the Town does hereby absolve itself from any and all claims or damages resulting from the installation, maintenance, or existence of the Encroachment encountered by the Developer/Owner or their heirs or assigns or to any other person or property receiving damage from the Encroachment regardless of the cause. The Town also hereby absolves itself from any and all maintenance, repair, or removal obligations for the Encroachment.

Witness	_
W Itiless	
	BY:
Witness	Name:
	Title:
STATE OF CONNECTICUT)
	ss. Avon
COUNTY OF HARTFORD)
	, 20, before me personally appeared y proven) to be the person whose name is subscribed to within the I that he/she executed the same for the purposes therein contained a
In Witness Whereof, I hereunto se	et my hand and official seal.
	Notary Public
	My Commission Expires