

**RIGHT OF ENTRY-PERMIT – REQUEST FOR CANCELLATION**

To cancel a previously-granted Right of Entry Permit, this cancellation form must be signed by the Owner(s), and either delivered to the Sonoma County Environmental Health at 625 5<sup>th</sup> Street, Santa Rosa CA 95404, or emailed to EHROE@sonoma-county.org as a signed PDF. Sonoma County Environmental Health must receive this form on or prior to November 22, 2017.

All owners who signed the Right of Entry Permit must sign this request. Phone-in and verbal cancellations cannot be accepted. Cancellations can only be accepted up until the U.S. Army Corps of Engineers attempts to notify the property owner 24-48 hours in advance of Ash and Debris Cleanup (as described in the Right of Entry Permit). Please note that the Director of Environmental Health may deny requests for cancellation after November 22, 2017 (the deadline for private cleanup application submission).

**CANCELLATION**

By canceling the Right of Entry Permit, I/we am acknowledging that I/we must perform cleanup of the parcel to the standards set by the City of Santa Rosa or the County of Sonoma, and that if I/we do not do so by the deadlines set by the City and County, my/our property will be subject to abatement.

I/we have read and understand the foregoing statement concerning cancellation policies. I hereby certify that I/we request to cancel my/our Right of Entry Permit, and that I/we am/are foregoing public disaster assistance with respect to my/our property.

I/we represent and warrant that I/we have authority to execute this document. I/we agree to accept all responsibility for loss or damage to any person or entity, and to defend and indemnify, hold harmless, and release County from any actions, claims, or damages that may be asserted by any person with respect to my/our private removal of debris and any hazardous material from the below mentioned real estate property.

Property Owner Name(s):

\_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_

Assessor's Parcel Number (APN): \_\_\_\_\_

Application for Private Cleanup Program Submitted (circle one): Y / N

Property Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

County Approval: \_\_\_\_\_

Date: \_\_\_\_\_

The Owner should make a copy of the signed cancellation prior to submitting this form.