

Town of Morgan Construction Deposit Agreement

The undersigned agrees to deposit the sum of one thousand dollars (\$1000) with the Town of Morgan to be used as a Construction Deposit. This deposit is to be held in escrow and used for any damages to Town property and other fees determined necessary by the Town; these other fees to include re-inspections, street cleaning, occupancy without permit and failure to call for an inspection. These fees are noted on the permit fee schedules. Note that each day of occupancy without a permit is a separate offense and may be fined as such.

This deposit shall constitute an agreement on the part of the permit holder to assume financial responsibility on behalf of all persons directly or indirectly employed in the work for which a permit is secured. By signing below, the undersigned authorizes the Town to deduct from this deposit any amount(s) needed to correct damages or other assessed fees as stated above. Also, the undersigned acknowledges that the undersigned will pay, within ten (10) days, any sums due and owing to the Town resulting from charges in excess of the one thousand dollar (\$1000) deposit. If default of payment occurs, it is further understood that any costs of the Town shall be assessed against said property in the form of a special assessment on the property taxes.

The undersigned authorizes the building inspector for the Town of Morgan to stop any further construction by the undersigned in the Town of Morgan until such time as the one thousand dollar (\$1000) deposit has been replenished.

In so executing the document, the undersigned binds the undersigned, said undersigned's heirs, assigns and transferees in interest.

Owner/Contractor/Authorized Officer:

 (Please Print) Last First MI

 Street Address City Zip Code Telephone Number

 Job Location Street City Zip Code Telephone Number

 Signature (Owner/Contractor/Authorized Officer) Date

 Signature (Building Inspector) Date

Refund To: _____
Name Street City Zip Code

Refund Amount: _____ Refund Date: _____ OK By: _____

Amount Deducted: _____ Reason(s): _____