

# COUNTY OF ST. PAUL NO. 19

*Our Mission - To create desirable rural experiences*



## PW-19 Towing Policy

**Department: Public Works**

### **Purpose:**

The purpose of this policy is to provide guidelines for conditions when Towing of vehicles is permitted by County staff using County vehicles and equipment.

### **Policy Statements:**

In most circumstances, County vehicles and equipment shall not be used to tow/pull out any private vehicle from being stuck on a County roadway or road allowance except in cases where the safety of the driver, passengers or travelling public is deemed to be at risk (due to extreme cold or other hazardous conditions).

County Employees shall follow the Safe Operating Procedures.

The party requesting the towing/pulling, must complete and sign the Release, Waiver, Indemnity Vehicle Tow Form before any municipal equipment or vehicle is authorized to commence a towing/pulling situation.

Council Approval: January 9, 2024

# COUNTY OF ST. PAUL NO. 19

*Our Mission - To create desirable rural experiences*



## RELEASE, WAIVER INDEMNITY VEHICLE TOW FORM

I, \_\_\_\_\_ hereby release, waive and forever discharge the County of St. Paul and all its respective Agents and/or employees of and from all claims, demands, damage, costs, expenses, actions, and causes or actions whether in law or equity in respect of death, injury, loss or damage to my person or property howsoever caused arising or to arise by reason of the towing (pulling out) of a vehicle described as:

Vehicle Make/Model: \_\_\_\_\_ License #: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ (am/pm)

Location: \_\_\_\_\_

I further hereby undertake to hold and save harmless and agree to indemnify all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with the said towing (pulling out) of the vehicle.

By signing this form, I acknowledge having read, understood, and agreed to the above waiver, release and indemnity.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

Phone No: \_\_\_\_\_