

SHARED HOUSING DISCLAIMER, WAIVER AND INDEMNIFICATION

As a service to our senior residents, the City of Irvine Keen Center for Senior Resources ("the City") provides the opportunity for individuals to advertise available shared housing opportunities. The City reserves the right to refuse those listings which do not seek or offer shared housing within the City of Irvine.

The City does not recommend, investigate, endorse, or guarantee the accuracy of any listing, the quality of the facility listed or the suitability of the listed individuals or those sharing housing or responding to the listings. The users of this service communicate, investigate and contract with each other individually and at their own risk.

The City highly recommends that you conduct a thorough screening process of prospective roommates and housing prior to sharing housing, including:

- 1. Former rental history check
- 2. Credit history check
- 2. Background/Criminal history check
- 3. Registered sex offender check (see http://www.meganslaw.ca.gov); Please note that not all offenders are required to be posted on this website
- 4. Contact a minimum of three personal references
- 5. Thorough inspection of the safety and suitability of the shared premises

WAIVER RELEASE AND INDEMNIFICATION

By signing below, the undersigned hereby releases, waives and holds harmless the City of Irvine and its Council members, officers, employees, and agents (collectively "City Representatives") from any and suits, claims, damages, losses, injuries, (including property damage, bodily injury or death), and any other compensable loss of any type (collectively "Claims") to you and your family arising out of the use of the bulletin board or arising out of any housing shared or arrangements made by users of the service, whether or not the negligence of the City or City Representatives contribute to or cause the Claims. This release does not apply to the extent the Claims are caused by the gross negligence or willful or wanton misconduct of the City or City Representatives. You further agree to defend and indemnify the City and City Representatives from any and all Claims directly or indirectly arising out of the negligent, reckless or willful acts or omissions of you or your family.

I CERTIFY THAT I HAVE READ AND UNDERSTAND THIS AND AGREE ON BEHALF OF MYSELF AND MY FAMILY.

NAME (PRINT)	WITNESS NAME (PRINT)
SIGNATURE	WITNESS SIGNATURE (Optional)
DATE	DATE