ADOPT A STORM DRAIN PROGRAM

Protecting Our Local Watersheds

ADOPT A STORM DRAIN APPLICATION

I would like to volunteer to adopt a storm drain in my neighborhood as part of the City of Cedar Rapids "Adopt A Storm Drain Program" to help protect water quality in our local streams and lakes. I/we agree to help with the following:

- Monitor the selected storm drain and the area approximately 20 feet on either side, monthly or as needed, and clean up any non-hazardous debris and deposit it in a trash can. Record the amount and type of debris removed.
- Report any observations of disposal of hazardous substances such as gasoline, motor oil, paint, fertilizers and pesticides etc. to the City of Cedar Rapids at (319) 286-5802.
- Distribute door hangars to neighbors to let them know when garbage, debris and other substances such as fertilizer residue, grass clippings and hazardous substances are found in or near the storm drain.

Storm Drain(s) Location:
For the period beginning: and ending:
Name of Volunteer:
Number of Volunteers:
Address:
(Please Print)
Telephone: (Home)
(Work)
Email address:
Does the City of Cedar Rapids have permission to post photos of the volunteer event on the City of Cedar Rapids Stormwater Program website?
Signature:
Date:

Adopt A Storm Drain

Be a local advocate for clean streams.

Volunteer to take care of the storm drain on your street.

Prevent pollution in your neighborhood.

Help improve water quality in your watershed.

Educate your neighbors on the connection between storm drains, streams and lakes.

Inform the city when illegal discharges are observed in your neighborhood.





RELEASE & WAIVER

I, the undersigned, am voluntarily participating in the City of Cedar Rapids Public Works Adopt a Storm Drain program (the "Program"). I have read and agree to follow the Volunteer Safety Guidelines provided to me by the City of Cedar Rapids Public Works Department for the Program. I acknowledge my participation in the Program does not come without the risk of injury or harm; I have considered this risk of injury or harm and I accept this risk and assume responsibility for all injury or harm to me or my property associated with my participation in the Program. By signing below, I agree to release, waive, and hold harmless the City of Cedar Rapids, Iowa, its officers, agents, employees and volunteers (collectively the "City") from any and all liability arising from my participation in the Program. I understand this release waives all claims, known or unknown, against the City arising out of my participation in the Program, including injury or death to self and damage to property, however such claim(s) may arise. By signing below, I agree that if, despite this release, waiver of liability and assumption of risk, I, or anyone on my behalf, make a claim against the City based upon my participation in the Program, I will indemnify, save and hold harmless the City from any loss, liability, damage or cost which it may incur as a result of such claim. I understand the City does not provide insurance for any injury to me, my property or other participants in the Program. This release is given in partial consideration of my being allowed to participate in the Program and binds me, my personal representatives and any of my heirs or assigns. If any portion of this release is held invalid by any court, I agree the balance of this release shall continue in full force and effect. I HAVE READ THIS RELEASE CAREFULLY AND UNDERSTAND IT. I HAVE SIGNED THIS RELEASE FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Signature:	
Date:	
Signature:	
Date:	
Signature:	
Date:	

Return this completed application and release to sewer@cedar-rapids.org (Attn: Stormwater Coordinator) or by mailing to:

City of Cedar Rapids Public Works Department, Sewer Division Attn: Stormwater Coordinator 500 15th Ave SW 52404