

Waiver of Liability Form Contractors

Contractor Information

- Full Name: _____
- Company Name: _____
- Address: _____
- Contact Number: _____
- Email Address: _____

Project Information

- Project Name: _____
- Project Address: _____
- Start Date: _____
- Completion Date: _____

Acknowledgment of Risks

- I acknowledge that the project involves inherent risks.
- I accept responsibility for any personal injury or property damage that may occur.

Insurance Details

- Policy Provider: _____
- Policy Number: _____
- Coverage Amount: _____

Signature Section

I, _____ (Contractor Name), agree to waive liability for the hiring entity regarding risks associated with the outlined project.

Signature: _____

Date: _____