

**DEFENSE AND INDEMNIFICATION STATEMENT**

I HEREBY AFFIRM THAT I HAVE READ THE TEMPORARY EVENTS MANUAL AND STATE THAT THE INFORMATION PROVIDED WITH THE APPLICATION IS CORRECT. I AGREE TO COMPLY WITH ALL CONDITIONS ATTACHED TO THIS LICENSE, COUNTY ORDINANCES AND STATE LAWS RELATED TO CONDUCTING THE ACTIVITIES DESCRIBED IN THE APPLICATION. I AGREE TO DEFEND, INDEMNIFY AND HOLD THE COUNTY OF NAPA AND EACH AND ALL OF ITS OFFICERS, AGENTS AND EMPLOYEES HARMLESS FROM ANY AND ALL CLAIMS, ACTIONS, DAMAGES, COSTS AND EXPENSES, INCLUDING ATTORNEY'S FEES, TO THE EXTENT SUCH ARE CAUSED BY THE NEGLIGENT ACTS OR OMISSIONS BY ME OR AUTHORIZED PARTICIPANTS OR ATTENDEES AT THE TEMPORARY EVENT.

  
\_\_\_\_\_  
SIGNATURE OF APPLICANT (or authorized representative)  
(Required)

*Feb 12<sup>th</sup> 2026*  
\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
SIGNATURE OF PROPERTY OWNER (or authorized representative)  
(Required)

02/12/2026  
\_\_\_\_\_  
DATE

**PLEASE ATTACH YOUR CERTIFICATE OF INSURANCE TO THIS DOCUMENT**

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**FOR OFFICE USE ONLY**

DATE SUBMITTED: \_\_\_\_\_

FILE NUMBER \_\_\_\_\_